



END-OF-TERM EVALUATION OF THE CO-ORDINATION UNIT FOR THE REHABILITATION OF THE ENVIRONMENT (*CURE*)

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Community
Partnerships for
Sustainable
Resource
Management in
Malawi

End-Of-Term Evaluation of the co-ordination Unit for the Rehabilitation of the Environment (*CURE*)

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LIST OF ACRONYMS AND ABBREVIATIONS

For all the NGO/CBO acronyms, see Annex 6

ADC	Area Development Committee
ADD	Agricultural Development Division
CBD	Convention on Biological Diversity
CBNRM	Community Based Natural Resources Management
CBO	Community Based Organisation
CCD	Convention to Combat Desertification
CDO	Community Development Office
COMPASS	Community Partnerships for Sustainable Resource Management
CONGOMA	Council for Non-Governmental Organisations
CURE	Co-ordination Unit for the Rehabilitation of the Environment
DAI	Development Alternatives, Incorporated
DEC	District Executive Committee
DESC	District Environmental Sub-Committee
DMA	Development Management Associates
DNPW	Department of National Parks and Wildlife
E&NRM	Environment and Natural Resource Management
EAD	Environmental Affairs Department
ECM	Environmental Co-ordination Meeting
EDO	Environmental District Officer
FRIM	Forestry Research Institute of Malawi
HIV	Human Immuno-deficiency Virus
ICRAF	International Centre for Research in Agroforestry
IKS	Indigenous Knowledge Systems
INGO	International Non- Governmental Organisation
INTRAC	The International NGO Training and Research Centre
NCE	National Council for the Environment
NGO	Non-Governmental Organisation
NRM	Natural Resources Management
NRMC	Natural Resources Management Committee
PDM	Participatory Development Methods
PRA	Participatory Rural Appraisal
RDP	Rural Development Committee
SADC	Southern African Development Community
SOER	State of Environment Report
STTA	Short-Term Technical Assistance
TfT	Training for Transformation
TOT	Training of Trainers
UNDP	United Nations Development Programme
USAID	United States Aid for International Development
VDC	Village Development Committee

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EXECUTIVE SUMMARY

1. Introduction

Since its establishment in 1994, the Co-ordination Unit for the Rehabilitation of the Environment (CURE) has been implementing a community based environmental and natural resource management programme that focuses on capacity building, coordination and advocacy. CURE's role in environmental and natural resource management is highly valued by many stakeholders. To continue providing quality services to partners, CURE needs to visualise its future strategically in order to fit in the changing environment. To remain a reputable and viable apex organisation for information exchange and capacity building, CURE needs to be responsive to the various changes taking place in the country and continue to rethink its way forward and beyond in order to pursue her mission. The last major rethinking effort was made five years ago during which a four-year strategic plan (1996-2000) was developed. This was followed by a series of programme review meetings, staff retreats and board/staff meetings in order to keep the organisation afloat with the various external and internal environmental changes. All these rethinking exercises proved very useful and shaped the way forward for CURE in terms of how the organisation could respond to the changing external and internal environments. These meetings also provided an opportunity for staff to meditate on their various roles and contribution in the organisation as well as discussing some internal management systems.

At a retreat held in November 1998 CURE formulated a goal “to promote good environmental governance for sustainable livelihoods”. Its mission was “to assist NGOs enhance the impact, gender equity and sustainability of community-based natural resource management (CBNRM) interventions through capacity building, co-ordination, information exchange and advocacy.” In order to achieve its objectives, CURE further decided to work with 14 core-partners, including established and emerging NGOs and CBOs. CURE defined five products for delivery to its core-partners, partners and clients. These were: *Participatory Development Methods/Approaches (PDM)* including Participatory Rural Appraisal (PRA) training, Training for Transformation (TfT), Training of Trainers (TOT) and Community mobilisation; *Gender* awareness, analysis and planning; *Projects Advisory Services* including Proposal development, On-going technical input in gender, and Forestry and natural resources management; *Networking and Co-ordination* including Co-ordination meetings, Printing services, and Helping partners access information; and *Advocacy*.

The year 2001 brings to an end a three-year funding phase. It is of interest to find out to what extent CURE has managed to achieve the objectives towards the fulfilment of its mission, and how the delivery of its products has fared, with a view to building on the organisation's strengths while striving to overcome its weaknesses.

2. The Evaluation Mission

The purpose of this end-of-term evaluation was to assist CURE review its performance in the 1999-2001 period relative to the objectives and goal. The task involved carrying out an in depth evaluation of CURE's activities and relationship

with partners; gauging CURE's impact; and making recommendations for improvements. This was done by engaging in oral interviews complemented by written responses wherever necessary. The results of the evaluation fed into a strategic planning exercise for the next four years (2002-2005).

3. Mission's Findings and Recommendations

3.1 The team examined CURE's achievements weighed against planned activities and set targets in the areas of gender and natural resources management, participatory approaches to natural resource management, project planning and development, communication and co-ordination, and advocacy. The team observes that CURE concentrated on capacity building through training as its core-business, with particular focus on contact with the 14 core-partners although other partners and clients were included in open-access trainings. CURE achieved varying degrees of success in meeting the targets set. In most cases there was adequate achievement in as far as more than 50% of the set targets were generally achieved. An interesting performance rating that came up from opinions of 13 partners who were engaged in interviews is to give CURE an average of 68% (range 45-95%) as its score.

Perceived impact of CURE

3.2 The team found that impact of CURE was demonstrable on core-partners, expressed in terms of what the partners were able to do in their own programmes as a result of undergoing CURE's trainings. The team concludes that in all the product delivery areas mentioned above, CURE registered satisfactory to more than satisfactory performance. Details to support this conclusion are the subject of the detailed evaluation report that shows undoubted capacity building of the core-partners receiving CURE's training. However, demonstrating CURE's impact at the community level was not possible except in some indirect ways, through the impact that CURE's core-partners have achieved. Since the desired impact on CBNRM must occur at the community level, the evaluation recommends reformulation of the mission to focus more closely on product delivery to the communities.

Capacity-building approach

3.3 The team found that high staff turnover was being experienced within the whole NGO community, in both established and emerging NGOs. This obviated the need for continued training as well as offering training to address new fields of relevance. Partners therefore endorsed continuation of the capacity building approach. However, the type of training that CURE has been giving is characterised by routine based on a curriculum approach, with a high cost per capita of around K16,000 (range K8,000-K24,000). This is unsustainable, apart from not being partner specific. During the strategic planning exercise the capacity building approach was redesigned to be focused on action learning through demonstration of good practices in CBNRM, such as exchange visits, field days, etc. The emphasis was that CURE needs to come out of the classroom situation and get into face to face contact with communities that are practicing good ecological management, and then use these as focal points of a field-based training programme.

CURE's perceived role of co-ordination

3.4 Partners indicated a high level of confidence in ECMs that CURE has been convening and recommended that they continue. Emphasis was placed on making ECMs more accessible by convening them in all the regions. The newsletter as it stands now was seen to be less effective. Many suggestions were made regarding how to improve its effectiveness as an important vehicle for networking, and for reflecting the views of the communities. The suggestions included embarking on capacity building for those that manage information in the various NGOs/CBOs to make more effective contributions. CURE was also urged to be more vibrant in the area of publicity and outreach. Leadership in celebrating thematic days in environment and publicity in mass media were seen to have been underperformed by CURE.

CURE's perceived role of advocacy

3.5 Partners felt that CURE has played an important role in advocacy in issues concerning land reform, CBNRM and gender in as far as CURE eloquently articulated the relevant concerns. Partners, however, felt that CURE should have consulted the NGO community more than it did before presenting issues for lobbying. Partners pointed out the importance of group strength rather than going it alone. Also, most partners felt that CURE was not pro-active enough in issues of advocacy despite the undoubted impact that it effected once it added its voice. Partners emphasised the importance of the advocacy role in particular in policy formulation that requires that CURE should jump in early. A matter of concern was raised regarding representation whereby CURE has been incorporated as member on many national committees that would basically mean overstretching the organisation's capacity.

Board matters

3.6 Internally CURE has been characterised by staff turn over, more especially at the Executive Director's level. Partners felt that this was a constraint to the growth of the institution and that the Board should endeavour to stabilise the situation. Another internal problem that the Board has been grappling with is weaknesses in financial management that has previously resulted in loss of cash, and more recently in having to lay off the Accountant because of incompetence. Of immediate concern was the financial viability of CURE in view of the phasing out of funding to CURE by the traditional donor, CORDAID with effect from January 2002, while OXFAM, the other major donor, was as yet to make a decision.

CURE's expected response to decentralisation

3.7 The decentralised environmental management framework that is being implemented under the Decentralisation Policy will mean that CURE should find a niche at the district level. The situation offers an opportunity to link up with NGOs/CBOs at the District Assembly level where the EDO also interfaces with these. CURE would then play a more direct role through NGOs to impact on CBNRM at the community level.

CURE's geographical targeting

3.8 There were strong suggestions from partners for CURE to increase its coverage to the central and northern regions and to form blocks of districts to make them manageable.

SWOT analysis

3.9 Many partners were happy to talk about the strengths, weaknesses, opportunities and threats with regard to CURE. Although these are outside the TORs, they nevertheless provide some insights. They have, therefore, been listed in the report.

4. Recommendations

Based on the summaries above a number of recommendations were made.

4.1 Overall Recommendation

The evaluation report highlighted the high impact CURE has achieved in capacity building of core-partners, partners and clients. The report also highlighted the need for CURE to find a way of directly impacting on CBNRM at the grassroots level. During the strategic planning exercise, CURE undertook a review and redesigning of its mission to achieve the set goal, and defined indicators for the monitoring of its progress. CURE then went ahead to change its focus from training as its core-business to facilitation of action learning by NGOs/CBOs, thus making it possible to impact directly on communities.

The above-demonstrated determination by CURE to find the best option for effective delivery of CBNRM at the grassroots level is a major commitment. The team believes that the right, bold decision has been made. The team recommends that CURE's staff and the Board should be supported by the donors to make this new CBNRM strategy work for the benefit of the communities.

4.2 List of Recommendations

- a. In as far as the mission translates the aspirations set by the goal, CURE should carefully match the mission with the goal. This has already been achieved.
- b. CURE must define clearly its goal and mission and further define impact indicators that can be used to gauge achievements.
- c. The capacity building approach should continue as a strategy to meet the demand for trained manpower to fulfil the needs of NGOs, CBOs and other partners in addressing CBNRM issues at the community level.
- d. A training needs assessment should be conducted to identify what skills will be needed at community level. CURE has the responsibility to sensitise communities and mobilise them to come up with own solutions through awareness. Then CURE should make an inventory of what expertise is available to carry out the

training. Those that can train better than them should be contracted.

- e. CURE should not be identified as a mere training institution. Instead the future training programme that CURE will provide should be based on an exit strategy. This will involve taking on new partners, identifying their needs, providing relevant training and weaning them out. Particular attention will be given to the training of senior managers within partner organisations.
- f. CURE should not subsidise training of those partners that can afford to pay for the training, for example, the international NGOs. Partners should meet the full cost or be trained on a cost-sharing basis. Only those partners that are unable to meet any of the cost of training should be fully sponsored.
- g. While the Environmental Co-ordination Meetings have been highly acclaimed, their benefits do not extend much beyond those meetings. A redesigning of the nature of the ECMs and their status needs to be made to make them more valuable at community level.
- h. The newsletter should be re-designed taking into account the variety of presentation, languages to be used, and representativeness of the NGO community. Training of communication officers within NGOs should be carried out to increase competence in providing written contributions.
- i. CURE's mandate focuses on making a difference in CBNRM at community level. Institutionalisation of advocacy as core-function in the rethinking process would, therefore, be a major re-orientation of CURE's mandate. Thus advocacy should be considered as a secondary function.
- j. CURE should streamline its representation role to avoid being overburdened and allow for adequate time in discharging the core-function.
- k. CURE should continue to build around gender issues as a complimentary strategy in partner-specific capacity building, properly defining the intended goal and impact indicators.
- l. So far, CURE has operated at a core-partner level. This is a tier above where impact is greatest in CBNRM, namely, at community level. Yet going to communities directly would imply CURE turning into an implementer. The decentralised environmental management framework gives an opportunity for CURE to work at district level through the NGO-CBO linkage within the District Assembly. CURE should seriously consider adopting this route of access to communities.
- m. The question of more effective geographical coverage is concerned with ensuring that local participation is maximised. CURE should identify core-partners that can competently perform co-ordination functions without having to require physical presence of CURE staff, regardless of whether there is an increase in CURE's staffing level.

- n. CURE's capacity in terms of staff numbers must be justified on the basis of how the core-business is to be accomplished. Current indications are that the capacity needs to be increased to fulfil some core-functions.
- o. There needs to be more communication between the Board and Director, to give more active direction to the staff. The Board should be responding to the secretariat on how things are changing.
- p. The Board must make a careful selection for a person with good qualities and integrity for an Accountant, who may not be so highly qualified, thus unaffordable. Above all, there should be enough supervision in co-operation with the Director. Annual audits must be insisted upon as part of the process of track record building for the institution.
- q. CURE should find additional sources of supplementary funding to replace core-funding that was being provided by CORDAID and also find other ways of generating income.
- r. CURE should explore various opportunities that exist in CBNRM including follow-up activities based on COMPASS's programmes at its end of term.

SECTION I

A. INTRODUCTION

1. Since 1994, the NGO community in Malawi has grown tremendously. Currently, CONGOMA's consortium consists of 232 NGOs (including 22 international NGOs) compared with barely 50 in 1994. There is also an equally large number of Community Based Organisations (CBOs) (see glossary), probably over 200. This high level of interest within the civil society includes a tremendous increase in the number of NGOs working in environmental and natural resource management (E&NRM) area. There are now over 60 NGOs (emerging, established and international) balanced by many more CBOs that are addressing issues concerning E&NRM in an attempt to achieve sustainable development. Overall, the capacity of these institutions is limited. At the same time, Malawi has continued to experience worsening environmental degradation over the last decade due to mainly high population pressure, poverty and policy conflicts. In an effort to solve the problems, the government has since 1994 reviewed a number of policies related to environment and natural resource management sectors such as forestry, fisheries, environment, parks and wildlife, decentralisation and others. The government is currently in the process of developing the land reform policy. Of late, through the support from COMPASS, the government is in the process of developing a CBNRM strategy that will lead into the development and refinement of appropriate sectoral policies supportive of CBNRM in the country.

2. The Co-ordination Unit for the Rehabilitation of the Environment (CURE) was established in March 1994 as a national NGO. It was registered as an NGO under the Trustees Incorporation Act [CAP 5:03] on 8th March 1999. CURE started as a project within the Wildlife Society of Malawi originally intended to co-ordinate rehabilitation of the refugee-impacted areas following the end of the Mozambican war, as repatriation of the refugees got underway. CURE's role now covers the whole country to provide technical support and improve networking amongst NGOs working in E&NRM, the Government of Malawi, donors and other organisations or individuals working in the environment sector. A Board of eight Governors (three Trustees plus five members) governs CURE.

Goal

3. CURE's goal is to promote good environmental governance for sustainable livelihoods.

Mission Statement

4. CURE's mission is to assist NGOs enhance the impact, gender equity and sustainability of community based natural resource management (CBNRM) interventions through capacity building, co-ordination, information exchange and advocacy.

Objectives

5. CURE has three objectives that reflect the areas of focus of capacity (skills) building, co-ordination, collaboration and networking, and advocacy in CBNRM, as follows:

5.1 To provide high standard of gender sensitive, participatory training and advisory services to NGOs and CBOs involved in CBNRM;

5.2 To promote co-ordination and enhance the overall effectiveness of NGOs and CBOs involved in environmental and natural resource management activities through networking, information exchange and printing services; and

5.3 To promote and enhance NGO and CBO participation in policy and decision making processes affecting CBNRM.

The capacity building objective (objective 5.1) covers the three areas of gender, participatory development methods/approaches, and project planning and development. In the paragraphs that follow, objective 5.1 has therefore been divided into sub-objectives 1, 2 and 3.

Terms of Reference

6. Since its establishment in 1994, CURE has been implementing a community based environmental and natural resource management programme that focuses on capacity building, coordination and advocacy. CURE's role in environmental and natural resource management is highly valued by many stakeholders. To continue providing quality services to partners, CURE needs to visualise its future strategically in order to fit in the changing environment. To remain a reputable and viable apex organisation for information exchange and capacity building, CURE needs to be responsive to the various changes taking place in the country and continue to rethink its way forward and beyond in order to pursue her mission. The last major rethinking effort was made five years ago during which a four-year strategic plan (1996-2000) was developed. This was followed by a series of programme review meetings, staff retreats and board/staff meetings in order to keep the organisation afloat with the various external and internal environmental changes. All these rethinking exercises proved very useful and shaped the way forward for CURE in terms of how the organisation could respond to the changing external and internal environments. These meetings also provided an opportunity for staff to meditate on their various roles and contribution in the organisation as well as discussing some internal management systems.

7. In all the staff retreats, programme reviews and governing council quarterly meetings, a few strategic questions always emerged relating to CURE's strategy in the new millennium. The key questions are:

- ◆ What is the impact of the CURE?
- ◆ How is CURE going to respond to the government decentralisation policy?
- ◆ How relevant is CURE's capacity building programme approach. Is it still valid

- and sensitive to the needs and demands of the core-partners?
- ◆ Should CURE develop an exit strategy? If so what is it?
 - ◆ What is the role of CURE in the land reform processes?
 - ◆ How can CURE play a leading role in advocating for gender and sustainable community based environmental and natural resource governance?
 - ◆ Is the internal office environment in the organisation flexible and responsive to the external changes?

Purpose of the Evaluation

8. The purpose of the end-of-term evaluation is to assist CURE review its recent performance relative to the organisation's objectives and goals. As part of this effort, it will be essential to gauge the impact on CURE's clients and customers and the level of satisfaction expressed by these organisations. The tasks will involve carrying out an in depth evaluation of CURE's activities and relationship with partners; gauging CURE's impact; and making recommendations for improvements for incorporation into a strategic plan for the next four years (2002-2005). Specific TORs as set up by COMPASS are listed in Annex 1.

SECTION II

B. METHODOLOGY OF THE EVALUATION

9. The team had an initial one-day briefing at CURE offices on the background to the evaluation, purpose of the evaluation, linkages with the forthcoming strategic planning exercise for CURE, review of Terms of Reference and main outputs, and review of schedules. The next sixteen days were spent reviewing documents, holding consultations with relevant donor agencies and discussing with NGOs and CBOs. Core partners of CURE in all the three Regions of the country were visited.

10. Interviews were made with individual section Heads, or sometimes accompanied by one to two other officers. In all cases, a structured interview was held, tailored to whether the interviewee was an NGO/CBO partner, donor or member of the Board. Issues covered included: capacity-building needs for partners; services demanded from CURE; relationship with CURE as service provider and the level of partner satisfaction attained including the desirability of an exit strategy; CURE's geographical targeting; perceived CURE's role of coordination; its role of advocacy in such matters as land reform, CBNRM, gender etc; CURE's expected response to decentralisation; perceived overall impact of CURE; and the way forward for CURE. Annex 2 gives key questions used during oral interviews to guide the assessment of CURE's performance and suggestions on the way forward.

11. At the end of the oral interview, a written questionnaire was introduced. The aim was to obtain quantification of CURE-partner activities in the areas of Gender, Participatory Development Methods (PDM), Project Planning and Development, Communication and Co-ordination, and Advocacy. The questionnaire sought gender dis-aggregated responses wherever this was possible. Annex 3 gives details of the information requested. The questionnaires were returned by post, fax or e-mail. Annex 4 is a listing of individuals and organisations visited. Annex 5 gives meanings of terms used in this document.

12. The report was presented by the team at CURE's strategic planning workshop to provide any relevant input into the planning process and get feedback for further refinement of the report. The evaluation report is structured in such a way that it responds to TORs.

SECTION III

C. FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

The Goal/Mission

13. In the period prior to three years ago CURE had been working without a goal. At a retreat held in November 1998 a goal was formulated. Over the last three years, CURE has been operating with this goal. Partners, however, still pointed out that the goal as it stands now is overburdened in as far as “good environmental governance” involves too many other players where CURE does not have any grip, and that “sustainable livelihoods” is itself a wide area. Moreover, when a goal is defined, the next steps that should be taken should involve defining what are the intended impacts, what are the strategies towards achieving the goal, and what are the indicators of performance. CURE was yet to do this at the 2001 strategic planning exercise although there were attempts to define these indicators mid-way through the period. Thus in practice, CURE has been operating with a purpose but still without a goal.

Recommendation

In as far as the mission translates the aspirations set by the goal, CURE should carefully match the mission with the goal.

CURE's Partners

14. In its year 2000 Directory, CURE has published a list of 46 NGOs involved in the NRM sector in Malawi, seven of these being Youth NGOs (see Annex 6). At a retreat in November 1998, CURE selected 14 of these NGOs and called them **core-partners** while another list of 22 NGOs formed **partners**. Apart from core-partners and partners, CURE has offered training and other services to various clients (CBOs etc), as listed in Annex 6). In accordance with the mission statement, CURE defined five levels of interaction with clients to characterise its service delivery, namely: (i) offer open training, (ii) offer one-off advisory services, (iii) offer in-house training, (iv) offer longer consultancies, and (v) maintain on-going accompaniment. **Core-partners** were those that would form the major recipient of CURE services, that is, receiving all levels (i) to (v) while **partners** were to be confined to levels (i) and (ii) only. On the other hand, the INGOs and Government as partners, and any other clients, were to receive all levels but on a “buying” basis.

15. CURE further defined five core products that it would offer to its partners, as follows:

- i) *Participatory Development Methods/Approaches (PDM)* including Participatory Rural Appraisal (PRA) training, Training for Transformation (TfT), Training of Trainers (TOT) and Community mobilisation;
- ii) *Gender awareness, analysis and planning;*
- iii) *Projects Advisory Services* including Proposal development, On-going technical input in gender, and Forestry and natural resources management;
- iv) *Networking and Co-ordination* including Co-ordination meetings,

- v) Printing services, and Helping partners access information; and
Advocacy.

CURE has been working with the 14 core-partners and the other 22 NGO partners as shown in Annex 6 for the past three years in the area of capacity building.

CURE's planned vs. achieved activities

16. Over the past three years, CURE set out to implement a programme based mainly on capacity building. Annex 7 gives a summary of the extent of CURE's fulfilment of the set targets. However, while the summary of the set targets covers the entire 3-year period (1999-2001) the data that was readily available covers up to December 2000 and partially the first half of 2001. Annex 7 is therefore indicative of CURE's aspirations as set at the beginning of the period and what progress has been achieved after covering just over two of the three-year period. A more representative picture deals with how annual targets were achieved. In this regard, a complete set of data was available based on annual workplans for the period 1999-2000. Details of these were, therefore, compiled and are given in Annex 8. These describe CURE's achievements as weighed against set targets. The discussion that follows is based on these data, the interviews that were held with partners and results of the questionnaires returned by the partners. Of the 13 partners that were requested to complete the questionnaire, only ten returned the scripts. Annex 9 summarises partner responses to the questionnaire. As explained earlier (paragraph 5), objectives 1, 2 and 3 below relate to CURE's first objective that deals with capacity building.

Gender and Natural Resource Management

Objective 1: To build the capacity of NGOs in addressing gender aspects of NRM through training and integrating gender concerns into CBNRM programmes.

Output 1: Improved gender awareness and analytical skills amongst NGOs and CBOs involved in CBNRM.

17. To fulfil this objective CURE planned to conduct 20 training sessions by offering open gender awareness and analysis training, partner specific gender training, gender awareness and sensitisation for Executive Directors, special in-house gender sensitisation for selected NGOs, and gender leadership training for women. In addition, an attempt was made to build a pool of gender trainers by offering a Training of Trainers workshop. The entire gender programme targeted about 400 people in three years, with particular focus on core-partners. Achievements: over the first two and half years, there were 294 people trained (Annex 7A). While all the 14 core-partners provided trainees, a wider range of NGOs, altogether numbering 26, were trained (Annex 7B). Although 18 gender advisory services were planned, 29 were accomplished while 24 follow-up visits were undertaken and 14 visits to both NGOs and CBOs were made for needs assessment (Annex 8). Formal links were made with Theatre for Development of the Story Workshop and with CRECCOM as part of networking activities. Other details of activities are given in Annex 8.

18. All the partners that formed a sample in the questionnaire survey confirmed that

they were beneficiaries of training in gender and the total number of male trainees approximately balanced that of females. On the other hand, 70% of the partners indicated having received gender advisory services and 50% had follow-up gender visits. Also 70% of the partners indicated having received the gender training calendars (Annex 9).

19. Considering the wide range of activities under the gender unit of CURE, it is clear that a high level of achievement was attained, despite not being able to meet some of the targets set at the beginning. The objective 1 “to build gender capacity and integrate gender in partner CBNRM programmes” as set out above was largely fulfilled.

Participatory Approaches to Natural Resource Management

Objective 2: To improve skills of NGOs and CBOs in order for them to facilitate community participation in CBNRM initiatives.

Output 2: Improved skills amongst NGOs and CBOs in soliciting community participation in CBNRM projects.

20. This unit uses Participatory Development Methods to solicit community participation in CBNRM projects and programmes. Partners are trained in a range of methodologies, including Participatory Rural Appraisal (PRA), Training for Transformation (TfT) and Community Mobilisation, Training of Trainers (TOT), and Community Facilitation skills. To fulfil the above objective CURE planned to conduct 23 training workshops targeting 525 people, i.e. 6 PRA workshops for 90 people; 3 TfT workshops for 45 people; 3 workshops on Community Facilitation; and 11 partner/client specific training workshops. The following was achieved:

21. PRA: Six workshops were held as planned and the targeted number of 90 trainees was reached, distributed among 18 partners (Annex 7A). Details of partners trained are shown in Annex 7B. Partner specific PRA training workshops were also held (Annex 8).

22. TfT: Three workshops were planned for 45 people. Only one was, however, conducted for 20 people, involving 11 partners (Annex 7A,B).

23. Community mobilisation: Out of the three workshops planned for 45 people two were conducted involving 38 people from 11 partners (Annex 7A,B). In response to the questionnaire, 50% of the partners said they attended the workshops.

Project Planning and Development

Objective 3: To assist emerging NGOs and CBOs in participatory project implementation, planning and implementation through training and advisory services.

Output 3: Emerging NGOs and CBOs partners’ ability to effectively formulate and implement CBNRM projects.

24. CURE planned five training workshops in project design targeted at 75 people. Actual achievement was the conducting of three workshops during which 39 people were trained from 14 partners. In the questionnaire survey that was conducted, 60% of the partners said they participated in the workshops.

25. Other planned activities included 60 one-off consultations with emerging CBOs and NGOs. The extent to which this has been achieved has not been well documented although it is indicated in Annex 8 that such activities included CURE offering technical advice in CBNRM.

26. Overall, in the capacity building area involving objectives 2 and 3, the planned training of 525 people did not materialise. Only 204 were trained. More could have been achieved towards the set target. The training, however, covered all the areas that are important in Participatory Development Methods. In addition, Annex 8 shows that one Training of Trainers (TOT) workshop was conducted for core-partners that involved 15 NGO participants.

Communication and Co-ordination

Objective 4: To promote co-ordination and enhance the overall effectiveness of NGOs and CBOs involved in CBNRM through networking, information exchange and printing services.

Output 4: Improved co-ordination amongst NGOs and CBOs through availability of relevant information on CBNRM and development information sharing pathways.

27. To fulfil this objective CURE planned, among other activities, to hold 12 national Environmental Co-ordination Meetings (ECMs), produce one each of the NGO and gender directories, participate in 18 networks, publish 12 newsletters, produce six databases, produce and circulate 15 environmental posters, prepare 14 newspaper articles, produce five environmental education kits for NGOs and CBOs, participate in 17 national environmental events, strengthen the Resource Centre through computerisation of cataloguing, produce 36 paid-up desk-top publications, etc. Details of these activities and their achievements are outlined in Annex 8. In summary: production of environmental education kits was suspended awaiting recruitment of the concerned officer while production of the six databases was discontinued because of the complexity of the task. The remaining activities in networking, information dissemination, outreach, printing services, and library services were to a large extent fulfilled. Some key activities such as ECMs, the newsletter and participation in national and international events registered achievements of around 50 to 60% of the set targets (Annex 7, 8).

28. In response to the questionnaire survey, all partners indicated that they attended the ECMs and received the newsletter, while 90% of the partners indicated that they used the Resource Centre. Only 20% of the partners said they received visual aids while 70% received environmental posters (Annex 9).

29. Attainment of objective 4 was generally fulfilled in as far as most of the targets set in supporting areas of communication and co-ordination were achieved. There

were certain areas of underachievement as highlighted above that needed improvement.

Advocacy

Objective 5: To promote NGO and CBO participation in policy and decision-making processes affecting environmental and CBNRM.

Output 5: Improved environmental and CBNRM policies that incorporate the concerns from the NGOs and CBOs.

30. In fulfilment of the above objective, CURE planned to synthesise and disseminate findings on environment and NRM issues; to hold 12 quarterly meetings with NGOs and CBOs on issues that hinder or promote CBNRM activities; to initiate ten discussions with policy and decision-makers at government and NGO level; to design, print and distribute leaflets, 15 posters and 200 T-shirts containing environmental and NRM advocacy messages; to conduct six public campaign meetings with NGOs and other youth organisations; to produce and have broadcast 30 radio plays covering environmental messages; and to hold nine quarterly discussions with the mass and print media/journalists.

31. The achievements were as follows: a high level of lobbying with government and NGOs, attendance at donor co-ordination meetings and those of the advocacy task force, as well as keen production of promotion material, were all reflected in CURE exceeding the targets set. Conduct of public campaigns and holding of meetings with NGOs and CBOs registered around 60% of targets while contact with the mass/print media including production of radio plays only achieved around 30% of the targets (Annex 7, 8). The planned printing of the t-shirts was not achieved. However, most of the other supporting activities shown in Annex 8 represent a positive contribution to CURE's advocacy role.

32. CURE undoubtedly tackled the advocacy role vigorously despite the areas of weakness that have been noted in the foregoing. Contribution towards the achievement of objective 5 went a long way.

Revision of Major Programme Activities (January to December 2001)

33. Further to paragraph 16 above, it is to be noted that CURE and the funding agencies made a mid-term revision and agreed on scaling down or dropping of major activities based on two major factors. Firstly, there was reduced funding for training courses in years 2 and 3 of the programme. Secondly, some training activities in participatory development methods and gender were dropped because at a review meeting with core partners at the close of 1999 it was apparent that there was preference for less classroom teaching towards more practical and field based training while modifications to the format and duration of some modules was needed. Thus the underachievement in the various areas covered above (paragraph 17-32) was partly a result of the re-organisation and re-setting of targets during the revision.

SECTION IV

D. DISCUSSION AND RECOMMENDATIONS

Perceived impact of CURE

34. Most organisations believe that CURE has provided the necessary services and has made a name for itself very strongly. There is also general recognition of advocacy and gender being new areas so that further capacity building will be needed within NGOs and CBOs.

35. CURE is concerned about skills transfer to enhance the impact of NGOs and CBOs in CBNRM interventions. It is difficult to quantify how the transfer of skills translates into realities on the ground, at the community level, because most of the contact that CURE has established is with NGOs. This raises the question of what are the indicators that can be used to gauge CURE's impact, considering that training programs make up the bulk of CURE's activities. It is to be assumed that impact indicators are defined by what CURE has set out to achieve. But the question remains: Is it valid to measure NGOs' performance and attribute it to CURE? How do we assess CURE more directly? Some partners pointed out that the problem with this situation is that the whole of CURE's programme was open because of absence of goal. If, for example, the goal for gender were to ensure that NGOs mainstream gender in their programme, then CURE's impact would be assessed accordingly, while sticking to clear objectives and indicators.

Recommendation

CURE must define clearly its goal and mission and further define impact indicators that can be used to gauge achievements.

36. In view of the foregoing problem it was decided to use two levels of assessing impact: firstly, whether the partners receiving training have utilised the skills to initiate new activities; and secondly, whether changes happening at community level, and brought about by the partner receiving skills from CURE, can be largely attributed to CURE, though indirectly.

Impact at partner level

Gender issues

37. In response to the question "How have you utilised the knowledge and skills gained as a result of gender training?", 90% of the partners cited at least one of the following to demonstrate impact:

- ◆ Gender mainstreaming achieved in our project activities, i.e. food security programme activities, clean water and sanitation activities and micro-enterprise; or generally, in NRM programme work
- ◆ Taking account of gender during recruitment of all staff members and considerations for staff development
- ◆ Being able to discern gender not only as women's participation but involvement of all sexes, including children, disabled persons etc.

- ◆ Our trainings are organised in a manner to accommodate both sexes without discrimination
- ◆ Able to analyse power relations at household levels
- ◆ Identification of community problems affecting social groups
- ◆ Partner staff have come up with own training based on CURE modules and have become competent trainers themselves e.g. training of youth organisations

Only 10% of the partners that completed a written questionnaire indicated that their organisation had not made progress on gender issues because the person trained in gender got disinterested.

38. Further, the team found enough evidence during oral interviews that the NGOs that have received CURE's training went on to initiate new activities in CBNRM as follows:

- ◆ Some NGOs have done one or a combination of the following:
 - ▷ have prioritised gender
 - ▷ have institutionalised gender; involving setting up a gender unit or focal point, i.e. an individual has the responsibility as gender co-ordinator
 - ▷ have drafted their gender policy
 - ▷ are mainstreaming gender issues in their programmes i.e. introducing a budget line for gender
 - ▷ have demanded from CURE more advanced training in gender

Participatory Approaches to Natural Resource Management

39. *Participatory Rural Appraisal (PRA)*: Written responses of partners mentioned the following as impacts with regard to how they used skills gained from PRA training in their programmes:

- ◆ PRA has helped in community needs assessment before project implementation
- ◆ Community mobilisation in the NRM programme project sites
- ◆ Projects now originate from people
- ◆ Community sensitisation to discover their own needs
- ◆ Facilitation of PRA exercises in communities now possible.

In addition, CURE informed that visits to monitor partner progress have shown that PRA tools are being used properly by trained NGOs and there has been a better understanding of projects on the ground because of the training.

40. *Training for Transformation (TfT)*: **In** their responses to written questionnaire, partners said they used the skills gained after undergoing training offered by CURE as follows:

- ◆ Imparting leadership skills to area development committees, Traditional Leaders etc during community training sessions in food security and clean water
- ◆ For implementation of innovative approaches in natural resources utilisation
- ◆ In facilitating community learning and mobilising communities e.g. for sanitation project
- ◆ For changing peoples attitude in NRM
- ◆ Staff are able to understand development concepts and conceptualise projects
- ◆ Enabled solving of group problems of disintegration through transformation of

negative attitudes to positive

41. *Community mobilisation:* Partners indicated in questionnaire survey that they have utilised the skills as follows:

- ◆ Staff trained have successfully used the skills in community mobilisation and project activities implementation
- ◆ CURE's training has enhanced knowledge of adult learning so that trainings are organised to suit them.

Project Planning and Development

42. Partners answering to a questionnaire said that they are experiencing the following changes after undergoing CURE's training:

- ◆ Improved project management skills by the Senior Field Officers and improved project proposal development;
- ◆ Proposal writing and reporting has been made easier;
- ◆ Able to source funding from more donors through improved proposal preparation;
- ◆ Project implementation is easy because of the plans and commitment from staff and communities – the project cycle is clearly known.

Comment by CURE recognised that project proposal writing has improved such that proposals received from trained partner staff are of better quality, requiring only minor corrections. Further, CURE confirms that some of the proposals submitted have been funded by funding agencies like COMPASS etc.

Communication, Co-ordination and Advocacy

43. In response to the written questionnaire, 90% of the partners regarded ECMs as very valuable, and said:

- ◆ CURE has performed very well, particularly using ECMs where participatory approaches are used and key issues of interest identified
- ◆ CURE has enhanced NGO's participation in the policy and decision making process; this is also the area where more effort needs to be put, especially realising the impact some policies have on the livelihood of the rural poor.

On the other hand, only 10% of the partners felt that ECMs are poorly attended because a number of NGOs have not valued CURE's role and that CURE should, therefore, be more aggressive than is the case now. CURE's own view is that awareness raising among partners has resulted in frequent enquiries about the environmental co-ordination meetings, frequent requests to use the Resource Centre etc.

Impact on CBNRM achieved by partners

44. The second impact category is concerned with impact that partners achieve in CBNRM as a result of CURE's training. This is seen in the light of the question: Has CURE made a difference at the community level? Obviously, such impact cannot be attributed to CURE entirely although CURE has sometimes made an attempt to identify competent NGOs that have been used to achieve behavioural changes at community level. Issues that were covered above regarding CURE's impact on partners, are the same issues that translate into impact at the community level.

Partners, nevertheless, mentioned them, including:

- ◆ People are getting used to the idea of participatory planning when coming up with community projects.
- ◆ Women are now able to speak out on gender issues.
- ◆ People's attitudes are changing and consequently they are able to mobilise themselves for CBNRM
- ◆ With other players, CURE has raised the profile of key activities for maintaining environmental health such as tree planting, avoiding river pollution etc.

It is difficult to provide data to support some of these assertions. This would need a separate study. While impact assessment of CURE's training activities is possible at partner level, measurement of CURE's influence at the community level is more difficult to gauge. There is therefore need to define more clearly what will be CURE's product and how this is intended to be achieved so that appropriate impact indicators can be defined.

45. Consistent with the main objective 1, "to provide high standard of gender sensitive, participatory training and advisory services to NGOs and CBOs", CURE has successfully fulfilled this in so far as CURE's training has overwhelmingly been acclaimed as excellent. Almost all partners interviewed used various expressions that praised CURE for being a credible organisation that commands a lot of respect and deserves to be listened to. The team concludes that much of this reputation rests on the training programme whose impact on partners is demonstrable. At the community level, evidence of CURE's impact is more tenuous because it is indirect, through NGO/CBO.

Capacity-building approach

46. Over the past three years, CURE has cultivated more lasting relationships with certain partners in NRM, the core-partners described previously, than others. CURE has therefore achieved capacity building only in some key partners while others were missed out. For example, there has been a closer working relationship with the Forestry Department than with the Department of National Parks and Wildlife. The latter pointed out that for a number of years following CURE's establishment they collaborated with CURE. Subsequently, this relationship weakened. The DNPW were under the impression that perhaps CURE had shifted its emphasis to agriculture. An opportunity was lost in a partnership that was to involve CURE in contributing to wildlife management for sustainable livelihoods. DNPW expressed the need for brokers to work with communities, as they themselves are held with little trust by the communities.

47. Responses from oral interviews with partners showed that in general, both the established and emerging NGOs want the capacity building approach that CURE has been using to continue. The main reasons given are that once staff in a particular NGO has been trained, they become more marketable. This results in unending staff turnover as staff leaves for better-paying jobs and CURE is called upon to train new people again. Another reason partners expressed is that new issues are coming up all the time, for example, gender, that need capacity building. In general, it is clear that the staff turnover being experienced throughout the NGO community is a result of a great need for capacity building to satisfy a greatly expanded NGO sector. Even

though CURE may not directly provide this, it is clear that partners will continue to seek the services.

Recommendation

The capacity building approach should continue as a strategy to meet the demand for trained manpower to fulfil the needs of NGOs, CBOs and other partners in addressing CBNRM issues at the community level.

48. However, the type of capacity building that CURE has been imparting is based on a curriculum. CURE has been working on top of a CBNRM proposal over the past three years, confined to what the project said three years ago. Has CURE managed to keep abreast with what is going on in the environment and respond to the changes since then? CURE must therefore examine the way they deliver their workplan in the training mode and how it translates into CBNRM. A decision has to be made whether CURE should play a leadership role and stay on top or whether they are simply trying to translate CBNRM issues from top to share them with the communities.

49. Training should not become routine and repetitive. There is a tendency to repeat what was done several years ago simply because at that time it was successful. Instead, CURE should consider what contribution it wishes to make to a bigger picture, that is, what the training is trying to change. What are the partners being trained for? What difference has the training made on the sector? and beyond training, what other strategies can work? From records of meetings examined, these questions have been raised by key core-partners for the past year but have not been addressed. What is, therefore, needed is a demand-driven approach whereby constraints are identified at the community level and how they are to be addressed. For example, as Government appears to be withdrawing its services (the extension worker system is collapsing), new structures should be coming into place. In all this, CURE's role will not focus on direct implementation but rather to give guidance to NGOs to carry out these tasks.

Recommendation

A training needs assessment should be conducted to identify what skills will be needed at community level. CURE has the responsibility to sensitise communities and mobilise them to come up with own solutions through awareness. Then CURE should make an inventory of what expertise is available to carry out the training. Those that can train better than them should be contracted.

50. There is need for some form of exit strategy in the training programme. CURE should deal with individual organisations. i.e. there should be consultations to tailor capacity building to organisations. This can only be done if there is an organisational response. Being a trainer is different from being a partner. If CURE is to be a mere trainer, then they will be like other training institutions that they can compete with on the open market. Instead, CURE should categorise the NGOs rather than use a blanket set up. Those that are weak could be made to develop and later weaned out. The stronger NGOs will usually "poach" and thus create a need for further training as noted earlier. Some partners, however, expressed a concern regarding training that appears to fan staff turnover and thus becoming disruptive. For example, it is

predictable that training of volunteers will make them want to move to a more lucrative and secure NGO at the earliest opportunity than sticking with the mother organisation.

51. CURE's legitimacy in the eyes of its partners should be reflected in a strong demand for CURE's training. There is, therefore, the challenge for CURE to be relevant to answer to the needs of CBOs and NGOs. The latter must feel that they cannot do without CURE. Thus there must be a package that can evolve.

52. So far, those that go to train with CURE are mainly middle-level staff. CURE should strengthen the training of Senior Managers in organisations and government. If the junior staff have been trained, it is doubtful whether they are in a position to initiate certain activities within their institutions, "small" as they are. For CBOs, it is more likely that top people will be the ones sent to CURE for training, i.e. that the right people would be trained. These will be in a position to make decisions to change their organisations to be in line for improvements in CBNRM.

Recommendation

CURE should not be identified as a mere training institution. Instead the future training programme that CURE will provide should be based on an exit strategy. This will involve taking on new partners, identifying their needs, providing relevant training and weaning them out. Particular attention will be given to the training of senior managers within partner organisations.

53. The people that are leaving partner organisations for better-paying jobs either join other NGOs within the environment area or they are lost to other types of NGOs outside the environment area. Staff turnover appears to be a major problem, especially in emerging NGOs. CURE should examine the situation and decide whether it is fulfilling a need for capacity building globally for the environment sector. A useful exercise would be to carry out a tracer study to find out whether the skills gained are used within the CBNRM sector. The exercise was attempted in this exercise but discontinued because of limitations on time.

Cost implications of training

54. The cost of training is considerably high on cost per individual basis. This has been indicated for five trainings in Annex 7B. The average cost per individual participant in these trainings was found to be around K16,000 (range K8,000-K24,000). Cost-effectiveness regarding capacity building through training shows this to be unsustainable. The financial outlay should be justified on the basis that it translates into impact on CBNRM at the community level. Board members were of the opinion that international NGOs should be able to cover the full cost of training.

55. The partners who have been paying in order to get CURE's services expressed great satisfaction with the product from CURE, for example, the Forestry Department, demonstrating that CURE's training programme is competitive.

Recommendation

CURE should not subsidise training of those partners that can afford to pay for the training, for example, the international NGOs. Partners should meet the full cost or be trained on a cost-sharing basis. Only those partners that are unable to meet any of the cost of training should be fully sponsored.

CURE's perceived role of co-ordinationEnvironmental Co-ordination Meetings

56. The quarterly Environmental Co-ordination Meetings (ECMs) have been acclaimed to be of much benefit by most of the partners. They have been used as an opportunity to know each other's activities, motivate each other, get linked to donors, and share views on NRM. A common stand on certain issues has resulted, for example, in the land reform issue. Invited experts have sometimes provided important information on specific areas of NRM. The meetings have also served to resolve conflicts where misunderstandings between partners have been resolved through information sharing. The core-partners in the Northern Region particularly appreciated the ECMs when they were held in Mzuzu or Lilongwe because they became less of a burden on the budgets and because many local people could be mobilised to participate.

57. Some partners have pointed out the need for representation at the ECMs to be more consistent, emphasising continuity of issues that are discussed. Some partners have also pointed out that CURE has not taken advantage of its unique position to sort out conflicting approaches among NGOs in CBNRM. For example, the disruptive approach of paying money to communities that MASAF has used in CBNRM needed to be addressed at the ECMs as an appropriate forum. It was suggested that CURE should have some technical working group that can look at issues to be discussed. Then a decision can be made as to where the next quarterly co-ordination meeting will be held and what sort of major issues can be discussed. The present practice of CURE just sending letters to NGOs to ask what they want to be discussed at the next meeting, and whether they want to give a paper means dependence on a few responses to get issues.

58. Partners expressed concern that the ECMs have lately not been regular. This needs to be addressed. Furthermore, a major issue concerning the ECMs is their status that then determines the status of the decisions and recommendations that come out. Of particular concern is the legal status of such a forum and what it takes to legitimise the discussions. The institutional structures currently take no cognisance of the ECM forum. The CBNRM working group, as a sub-committee of the NCE that was established by an Act of Parliament, could be a possible channel for legitimisation. The new NGO Act needs to be explored also in as far as it has established an NGO Board of Malawi whose membership includes three government Ministries (Gender, Youth and Community Services; Justice; and Treasury).

59. A more fundamental point made by partners is that while the ECMs indeed provide excitement, what is their end result? Are there mechanisms for getting issues out and worked upon? It is thus important that beyond excitement, the ECMs should

aim at achieving an outcome that can impact on CBNRM.

Recommendation

While the Environmental Co-ordination Meetings have been highly acclaimed, their benefits do not extend much beyond those meetings. A redesigning of the nature of the ECMs and their status needs to be made to make them more valuable at community level.

Networking

60. Partners felt that CURE needs to work with more NGOs and establish new partnerships. Networking with old and new partners should be strengthened. Although modern communication by e-mail is very effective, some partners are yet to have access to such facilities, thus this highly convenient method will remain out of reach to some partners. For example, Livingstonia Synod at Ekwendeni pointed out that they have to go all the way to Mzuzu.

Newsletter

61. The newsletter was seen as an important medium for exchange of ideas and communication between partners. One partner said they recommended certain CBOs to receive the newsletter because of its valuable content. Those that read the newsletter regularly said they valued the information tremendously. The majority of partners regarded it as CURE's newsletter in the sense that most of the articles were originating from within, thus reflecting CURE much more than other NGOs. In some cases partners expressed uncertainty about whether or not the newsletter was being distributed lately – an indication of apparent loss of contact. Most partners, however acknowledged that they receive invitations to contribute to the newsletter but rarely did so.

62. There is not much support that is being given by partners to the newsletter. Sometimes this has necessitated summarising articles from other sources in order for the Secretariat to publish it. One partner mentioned that there is a problem with NGO set-up in Malawi whereby some NGOs do not recognise others. CURE might, therefore, be seen as “any other NGO” trying to publish its own newsletter. While this is an extreme case of misunderstanding of the role of CURE, and there is no reason to believe that most partners think that way, the truth is that there is inadequate presence of partners in the newsletter.

63. NGOs should use the newsletter to disseminate views from communities on NRM. The newsletter should only be a facilitator. The mode of presentation could be changed. It should be scaled down to reach the various clients. Some of the articles that have appeared are threateningly high-pitched. Perhaps a different format should be used, with more illustrations, simpler language – even vernacular. Outside sources such as IUCN-generated materials should continue to be used for circulation after simplifying. The newsletter alone is not enough. CURE should produce leaflets and brochures and other types of publications for specific targets.

64. NGOs are doing many things. NRM may be one of the things that a particular

generalist communication officer may be doing. Such people may lack training in NRM and skills to be analytical because they are not specialists. Few may have confidence in writing to be able to contribute articles. Thus CURE's role will be to link up with these NGOs and train communication officers. It might be an opportunity also to extend to videos and bring in expertise from outside, and then use these to raise awareness, and advocating with government and communities. NRM is a key area in view of the links with poverty. Above all, CURE should aggressively solicit articles by identifying individuals in organisations with whom they can link up.

Recommendation

The newsletter should be re-designed taking into account the variety of presentation, languages to be used, and representativeness of the NGO community. Training of communication officers within NGOs should be carried out to increase competence in providing written contributions.

Outreach

65. Environmental outreach, marketing of CURE services and publicity have to some extent been limited by funding provisions and staffing changes. However, the Resource Centre can benefit from collections of materials that form grey literature scattered in various offices as reports and studies. This has already been started by making a collection of what CURE has called Malawian literature. CURE could more systematically identify those who generate information and get the references to build a comprehensive collection on environment that can be consulted by stakeholders.

66. CURE is an NGO-based organisation. Therefore, it should be more transparent. Some partners felt that minutes should go out and other documents such as the constitution should be circulated.

67. CURE should take the opportunity offered by set days to commemorate such events as World Environment Day, Wetlands Day etc. They should not wait for an invitation from the Environmental Affairs Department. Rather, CURE and the NGO community should play an active role and organise NGOs, donors, traditional leaders etc. Donors would be willing to fund such activities. For example, in the year 2000, CURE printed material ready for the celebrations but were let down by EAD and those particular celebrations were not done. Partners feel that CURE should have gone ahead to complete the task. They should be leaders, be pro-active and more aggressive by approaching other organisations for support, such as UNDP.

Publicity

68. There is a proliferation of NGOs. Perhaps people are not aware that there are many environmental NGOs. They probably think that there is a gap. CURE should therefore publicise more, if possible on the radio and TV regarding what services it can offer. Many applications from NGOs (especially youth) have come to UNDP enquiring about where to go, apparently unaware about CURE's role.

CURE's perceived role of advocacy

Advocacy in Land Reform

69. Partners were happy that CURE participated in the land reform debate and contributed effectively. In particular, partners were pleased to see that CURE succeeded in slowing down the tempo of Government so that more critical thought is given to this issue before legislation was undertaken by parliament. Partners said that there was a positive effect when CURE featured on the radio and in newspapers. There was realisation by those in power that more consultation and broadening of the players were needed. Later, however, things lagged behind again.

70. The land reform issue provides several lessons for the future. CURE's serious entry into advocacy generated some excitement in terms of the relevance of their strategy. They were diversifying. But the question still remained: what is their mission/goal? Advocacy requires that there is continuous review of policy changes to avoid being re-active. This will involve interacting all the time with policy makers, looking out for issues and information in order to act more timely. There will be need to initiate, focus and make a follow-up on any one issue in environment in a sustained manner, and at the same time avoiding being tagged political. When a policy has finally been approved by Government, CURE should make a follow-up through the Parliamentary Committee on Environment or directly with the Minister responsible so that the policies are explained to the target groups.

71. Partners advised that the approach that CURE has used so far in advocacy is faulty because they used a small group. Government will not listen to a lone voice or a small group. Ideally, CURE should have analysed the policy and brought out issues and suggested alternatives in a similar fashion to what the Asian community did when they isolated the issue of "what is indigenous?". CURE could have mobilised land reform NGOs and these could have been more effective.

72. Most partners said that CURE was not pro-active in the land reform issue. The problem, however, is "how proactive does one get?". It may not be a result of not wanting to be involved rather than Government itself not being transparent so that an opportunity arises. CURE therefore needs to get in at the higher level, to be better informed about policy changes/reforms.

73. Partners suggested areas that need advocacy. Some of these areas appear to be of limited scope. Nevertheless, the suggestions are listed here, including:

- ◆ lobbying for electrical appliances and electricity availability in urban areas to combat deforestation;
- ◆ a campaign against planting of *Eucalyptus* trees to avoid ground water depletion;
- ◆ introduction of a law that forces people to conserve land for a given period;
- ◆ a campaign against cutting trees along river banks;
- ◆ lobbying for meaningful devolution of power by Forestry and Fisheries Departments in decentralisation (for the DNPW, decentralisation will apparently not be as extensive);

- ◆ getting involved to resolve conflicts by identifying concerns on both parties;
- ◆ lobbying for speedy approval of community by-laws so that it can be done at the regional level;
- ◆ sensitising government personnel to adopt a participatory, people-centred approach in government regulatory services;
- ◆ lobbying for better sanitation, disposal of waste and enforcement of rules and regulations in urban areas; and
- ◆ in the minerals sector: working towards making Government policy flexible and advocate for policy change to enable communities participate.

Advocacy in Community Based Natural Resource Management (CBNRM)

74. Partners said that CURE has been instrumental in raising the profile of CBNRM through the co-management concept and the training they have done is high profile awareness creation that has made working with the communities more effective. Another partner view is that CURE has advocated for CBNRM on behalf of NGOs by taking advantage of its membership to the current CBNRM working group. CURE was proactive in its initiation of the crocodile issue, lobbying that the culling should be effected for the benefit of the people. How well CURE could respond to such externalities is gauged by the subsequent waning and finally dropping of the issue without having it concluded.

75. Partners felt that CURE could have done more on CBNRM especially if core-partners were given the opportunity to have a formal input into the CBNRM policy document. There was no prior lobbying with NGOs by CURE on this issue. While the co-management concept may appear in order with Government, it is confusing to the communities, especially on benefit sharing. A study by Action Aid confirms this. CURE, therefore, needs to articulate the needs of the communities on benefit sharing.

76. Moreover, if CURE wishes to go into advocacy this will need careful planning, including assessment of budgetary needs. Advocacy should not simply be a one-off type of activity. It needs researching on what changes are taking place in the environment, thorough analysis of emerging issues and organisation of approaches. So far, CURE's advocacy role in land reform has simply coincided with an individual's interest (of the former Executive Director) while institutionalisation of advocacy would need more careful planning, especially to define clearly how CURE's mission would be addressed.

Recommendation

CURE's mandate focuses on making a difference in CBNRM at community level. Institutionalisation of advocacy as core-function in the rethinking process would, therefore, be a major re-orientation of CURE's mandate. Thus advocacy should be considered as a secondary function.

CURE's representation and policy analysis role

77. As CBNRM becomes strategic, new things will arise. CURE needs to present positions on issues. They should slot in other players who can take an entity forward (the champions) while others strategise. If champions do not exist, then they should

be recruited from NGOs. Individuals should be frank about their strengths and weaknesses. The policy interpretation/analysis area is weak. As a matter of fact, there are many NGOs directly in touch with communities. They do not have adequate information. The new decentralised district framework places NGOs as part of the structure e.g. the NGOs are supposed to be part of the DEC, ADC, VDC. Do the NGOs know what role they are supposed to play at these levels? e.g. do they feel that it is their responsibility to attend a DEC meeting? In fact, do they know that they are part of the structure of the District framework? CURE's role would then be to jump on to new policies e.g. wildlife policy, energy policy, forestry policy, fisheries policy etc., analyse and circulate ideas to NGOs for advocacy. CURE should distil the policies and ensure that NGOs are familiar with what these policies say so that the members know how to fit them into the picture and stay on top of them.

78. The structure of DDC–ADC–VDC is an imposed structure. There are many committees at these hopefully grassroots levels that have never worked. The reason is partly because the institutions are not endogenous. Yet we do know that communities have well-established structures that work. CURE should take another look at these endogenous structures. Basically, the DDC-ADC-VDC structures are too high from the grassroots. Below the VDC, there are structures that work well, e.g. the church as an existing structure can be used as an extension system, and CBO-level social organisations. Thus CURE should identify NGOs that reach out to CBOs and undertake to understand the systems that are operating effectively at grassroots in CBNRM. These NGOs should get a clear mandate from CURE that they have the task to engage CBOs and make a difference. CURE can come in and train these district-oriented CBOs and further facilitate the formulation of their by-laws.

79. Partners recognised that CURE is in strong position for the grassroots advocacy, as member of NCE and donor forum as well as through dealings with Parliamentary Committee on Environment. CBNRM policies do not seem to translate to grassroots levels. The link with the Parliamentary Committee or policy makers needs strengthening because many problems arise from the policy makers. Members of Parliament may have been elected to their office on the basis of being popular figures but they need the right exposure and sensitisation on issues of environment.

80. Partners felt that CURE is sitting on too many committees. This needs to be addressed. A suggestion was made to get a volunteer (Technical Assistance) to come into CURE to inject into it some new ideas. Alternatively, or additionally, CURE staff should go out to visit other institutions abroad.

Recommendation

CURE should streamline its representation role to avoid being overburdened and allow for adequate time in discharging the core-function.
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Advocacy in Gender issues

81. CURE has done a lot in advocacy for the girl child to change thinking of the people so that the girl child is given the same opportunity as the boy. Partners felt that there has been a contribution to achieving overall changes in attitudes, for example, parents in communities that have been adequately sensitised now keep

money for school for the girl child.

82. CURE has come up with interesting results. The analogy of the “3-stone fire: one for dad, one for mum, one for child; you bring in a stove, you lose part of tradition” has emphasised the need to develop strong messages. CURE has capitalised on this and got an influence. Part of advocacy involves refining messages. For example, the message that one in three people has HIV has brought reality closer to people. Similarly, CURE can analyse a situation about the deforestation and bring out an appropriate message from an analytical point of view (such as “how many gardens are we losing into Shire River” etc), rather than saying “there are no alternatives” as commonly heard.

83. There is still confusion about gender that needs to be further clarified. To illustrate how this is being tackled, CURE has, for example, denounced looking merely at “women’s presence” in meetings as indicative of gender balance. Rather, different parameters for effective participation/activity in decision making/equity should be used. Partners said, “we need better gender lenses, not feminism”. CURE should continue to provide leadership.

84. There are some partners that have not taken up gender issues but are beginning to open up. For example, the Department of National Parks and Wildlife expressed the need for greater participation of women, as these are processors of wildlife products. Even though the DNPW created a Gender desk as co-ordinator of the SADC wildlife sector, gender issues have not yet taken off in their own programmes. Some NGOs have similarly lagged behind.

Recommendation

CURE should continue to build around gender issues as a complimentary strategy in partner-specific capacity building, properly defining the intended goal and impact indicators.

CURE’s expected response to decentralisation

85. Decentralised Environmental Management strategy with NGOs highlights the changing environment. If the new strategy is going to be successful, there should be greater support to NGOs/CBOs to work together with government in CBNRM. Collaboration is very important with the District Assembly. At the district level, CURE should link up with structures that already exist. District Environmental Sub-Committees (DESCs) will have to be consulted. CURE should communicate directly with focal points in each District and bring together NGOs and District Assemblies. It will be important to work closely with CBOs, those on the ground, so that they are empowered. CURE can do this through NGOs who are core-partners in those districts and through EDOs. On the other hand, CURE does not have the capacity to work with all the districts. Therefore, a sample approach will need to be used from which lessons can be drawn to pass on to NGOs working in other districts. The EDOs are key contacts within District Assemblies and decentralisation requires high calibre EDOs than the present state of affairs. The EDOs need further capacity building through closer working relationship with CURE.

86. Co-ordination meetings could now focus on bringing players at district level to participate, e.g. a convenient number of districts brought together, forming a block. Thus the decentralised district framework offers an opportunity to come down to the community level through the NGO-CBO linkage. CURE could also play a role to rationalise NGO presence and activities so that the district is more uniformly covered rather than having skewed coverage as is the case now.

87. Implementation of new policies involving resource transfer to communities is likely to cause conflicts arising from misunderstandings of the new roles of the Government agencies (Forestry Department, Fisheries Department, Department of National Parks and Wildlife, District Assembly) on the one hand and the community groupings (CBOs, Community Trusts) on the other hand. Although conflict resolution is not a core function, CURE will need to contribute by using its unique position of being able to bring partners together in the overall package of co-ordination activities. Partners cited the case where the Forestry Department has signed agreements with the community over use of resources, for example, the Chimaliro Forest Reserve in Kasungu where there is urgent need to ensure that there is common understanding of issues of sustainable resource use by the communities. CURE could help NGOs and partners towards better understanding.

88. Moreover, partners felt that there is a gap in the understanding of CBNRM by the smaller NGOs. There are many things that go on in environment. They are not all CBNRM. So what is the model for CBNRM? Some partners felt that CBNRM right now appears to be perceived as little corners that are disjointed. Thus there should be an overall model in which there should be an understanding between CURE, NGOs and District Assembly.

Recommendation

So far, CURE has operated at a core-partner level. This is a tier above where impact is greatest in CBNRM, namely, at community level. Yet going to communities directly would imply CURE turning into an implementer – a situation that is not supported. The decentralised environmental management framework gives an opportunity for CURE to work at district level through the NGO-CBO linkage within the District Assembly. CURE should seriously consider adopting this route of access to communities.

CURE's geographical targeting

89. CURE has a national coverage, but the number of NGOs affiliated to it is greatest in the south. Although funding for CBOs from Oxfam extends from south of Lilongwe to the southern region, this does not restrict CURE. Historically, rehabilitation was needed in the south where environmental degradation was greatest due to concentration of Mozambican refugees. Partners pointed out that we should realise that maintaining an environment that has not yet degraded is equally, and probably more important, than resorting to fire fighting later. There is a clear capacity problem in adequately covering the whole country. For example, CURE attempted to establish a liaison office in Lilongwe but it was closed.

90. Partners suggested that as co-ordinator, it would have been better for CURE to

have Regional Offices, with an officer to co-ordinate activities. The two (one for the centre and one for the north) could feed information to Headquarters but then would work with Districts directly. Administratively, CURE could remain in Blantyre but then recruit officers responsible for these other regions. This would not require CURE to be physically present in each district. Co-ordination is how regularly and how quickly CURE can link up with core-partners. An alternative partners suggested is to recruit staff to reside with willing co-partners to work on behalf of CURE in the Central and Northern Regions. It was very clear that partners found the co-ordination meetings held in the central and northern regions to have been most welcome because they gave an opportunity to grassroots players from that region to participate. To illustrate the level of interest in these meetings, RUFA said that it tried to organise a CURE meeting in the North. It failed five times. On the sixth attempt, people came but CURE cancelled at the last minute. Two years later, RUFA organised (on behalf of CURE) a successful regional meeting targeting the local community leaders, which is thought to have had tremendous impact. Regional officers could do such co-ordination, but recruitment of such personnel and maintaining their offices will require substantial resources.

Recommendation

The question of more effective geographical coverage is concerned with ensuring that local participation is maximised. CURE should identify core-partners that can competently perform co-ordination functions without having to require physical presence of CURE staff, regardless of whether there is an increase in CURE's staffing level.

Institutional issues

CURE's capacity

91. Opinions vary on whether CURE's staffing capacity is adequate or not. Many partners, however, noted that CURE was over-stretched and expressed the need for an increase in its staffing especially in order to address the new decentralised district framework and fulfil the idea of uniform geographic coverage as noted above. Minutes of the Board suggest that taking on extra staff was not being considered because of budgetary implications and that the present staff must instead do more work. The Board needs to revisit this in the light of the observations made above. Addressing some of the changing environment and natural resource management scenes may not necessarily translate into a substantial increase in staff, but rather, the redesigning of how staff members are to operate.

92. As districts become masters under the decentralisation scheme, having the mandate and the finance, the reality of the situation is that CURE will need to work directly with DESCs, which are anchored to the Directors of Planning who in turn, supervise EDOS. One partner said, "sometimes when CURE talks, you get an impression that they are big. Yet after talking, there is that feeling that it's all talk and no action because of constraints to capacity". Can CURE penetrate Districts? This would certainly need involvement of partner NGOs and their closer co-ordination. There seems to be a justifiable need for an increase in the staffing level. With regard to staff turnover, the Board will need to deliberate on what can be done to stabilise the

situation. A desirable impact in CBNRM can only be achieved if staffing is stable.

93. The core business of CURE is environmental. Therefore, CURE should also develop relevant capacity e.g. databases for environmental information. For the time being CURE has abandoned this project because of lack of expertise. There should be specialists in the environment area, while other areas should be complementary, such as gender.

94. CURE may not do well in core research projects since they do not have the capacity although competent people are available. Partners cited one such project on Indigenous Knowledge as a case in point where capacity constraints made it impossible to complete the project. There is need to forge a link with institutions that are specialised in research, such as the Centre for Social Research, FRIM, ICRAF, Universities etc.

Recommendation

CURE's capacity in terms of staff numbers must be justified on the basis of how the core-business is to be accomplished. Current indications are that the capacity needs to be increased to fulfil some core-functions.

Board matters

95. Since the KuChawe Inn retreat in 1998, the Board decided to add advocacy as important for the fulfilment of CURE's objectives. Partners have endorsed this as worthwhile. The addition of Advocacy to CURE's mandate requires the Board to make a careful search for an individual who has the interest, negotiating skills and visibility. Terms of reference for advocacy need to be clarified. Such an advocacy role would be secondary.

96. Various minutes of the Board indicate lengthy discussions on conditions of service and surprise by staff on some of the resolutions that have been taken, clearly showing an apparent lack of common understanding. CURE has also had its share of staff turnover. One of the ways to stabilise staffing is motivation. One idea would be for the Board to discuss rewarding staff by investing part of the income generated from consultancies for their retraining to consolidate competencies in their areas of specialisation and also broaden their expertise into other areas of NRM. This will also enable CURE take on a broader cross section of challenges and be responsive to the changing scene by multi-skilling of staff.

97. There are many opportunities for consultancies that CURE can undertake. The Board has actually spelt out the need for staff to engage in consultancies to generate income for CURE. Some 10% of the budget is expected to be generated and the Board has emphasised the need to fulfil this. Considering the reputation that CURE has established, these consultancies should not be difficult to come by. The Board raised a concern that in at least three consultancies that CURE has won staff backed down or sub-contracted, thus causing dissatisfaction in the client. There is therefore need to have a balance between CURE's core work and consultancies.

Recommendation

There needs to be more communication between the Board and Director, to give more active direction to the staff. The Board should be responding to the secretariat on how things are changing.

Financial matters

98. CURE has had an unfortunate experience just over three years ago, before the phase under review, through misappropriation of funds by an employee. The team learned that the money was being recovered from the concerned former employee. The loss of funds was, however, regrettable. The team learned that the problem of weaknesses in financial control has continued in a different form, through incompetence of the former Accountant, during the term under review.

99. Financial management has been less than satisfactory at CURE. Donors look for a track record in financial management and they are watching. This is a most critical area that must receive continuous monitoring by the Board as it contrasts sharply with CURE's very respectable reputation. The unsatisfactory track record that CURE has shown so far in financial matters is a result of inadequate controls. It is suggested that the Director should be given training in ways that will ensure that he is able to keep track of finances. There are many organisations that are run soundly by Accountants who have modest qualifications and these go on for years with clean records, accountability and efficiency.

Recommendation

The Board must make a careful selection for a person with good qualities and integrity for an Accountant, who may not be so highly qualified, thus unaffordable. Above all, there should be enough supervision in co-operation with the Director. Annual audits must be insisted upon as part of the process of track record building for the institution.

100. So far, CURE has been funded by traditional donors: OXFAM and CORDAID. These have ensured financial sustainability. Funding is becoming tighter as CORDAID is no longer co-financing the next phase beginning January 2002. CURE needs to take steps to look elsewhere and achieve multiple sources of funding. The approach will need to involve needs assessment for NGOs and packaging that information for presentation to donors.

Recommendation

CURE should find additional sources of supplementary funding to replace core-funding that was being provided by CORDAID and also find other ways of generating income.

101. COMPASS has now produced a four-year programme to promote CBNRM in Malawi. It is a commendable initiative towards the establishment of a CBNRM policy in Malawi. It is a strategy whose activities will need to be sustained beyond the four years when COMPASS may wind up its activities. CURE should seize the

opportunity to start planning for linking up with COMPASS on how best the programmes being established now will be sustained. For example, COMPASS has defined the type of CBOs that they can fund. One such CBO that is receiving support is the Lake Chilwa Fisheries Association.

Recommendation

CURE should explore various opportunities that exist in CBNRM including follow-up activities based on COMPASS's programmes at its end of term.

Opportunities

102. The following were opportunities that partners pointed out for CURE's consideration:

- ◆ Changing policies in NRM need explanation, hence an opportunity for lobbying
- ◆ Demand for training at all levels (EDOs, Senior managers etc) not yet fulfilled
- ◆ SOERs need data from NGOs that is more effectively accessible through CURE
- ◆ CURE can implement through other NGOs by taking advantage of its coordination role
- ◆ Availability of many emerging NGOs that need capacity building
- ◆ Re-discovering the role of Traditional leaders provides an entry point to local strong institutions for CBNRM
- ◆ Mandate on youth: CURE does not appear to have actively involved the youth - a vast resource to mobilise for CBNRM. Lobby Ministry of Education, Science and Technology to modify curriculum. Also, informal education has died out – revive it.
- ◆ Training of Forestry personnel in districts will be in higher demand under decentralisation
- ◆ Democracy has brought threats of more acute encroachment/resettlement of protected areas at the expense of management. EDOs are articulating importance of the areas. CURE can be involved in conflict resolution in Forestry.
- ◆ DNPW is looked at negatively due to crocodile attacks in people, use of parks etc. CURE could assist in attitude change.
- ◆ There is a vacuum in how conventions (CCD, CBD) get translated on the ground. CURE could assist to implement through NGOs.
- ◆ Communities can make by-laws. But they need to be informed about legal matters. CURE can train front-line staff.
- ◆ NRMC have been found to be inactive. CURE can play a role to raise their capacity.

Strengths

103. The following were CURE's strengths that were spelt out by partners:

- ◆ CURE is a neutral body, hence in the best position to handle environmental matters that concern many partners
- ◆ Ability to get a wide variety of NGOs together
- ◆ Collection of literature which is readily available to be accessed by NGOs

- ◆ Has influential staff
- ◆ CURE enjoys favourable representation at all levels
- ◆ Good personal relationships with Government officials
- ◆ Donors (including its main donor Oxfam) regard CURE as strong, open and communicative
- ◆ Compared with CONGOMA, CURE is in a favourable position (no fee charged)
- ◆ CURE is fairly focused, concentrating on CBNRM and indigenous NGOs
- ◆ CURE follows implementation of annual plans with great effort, and follows reporting procedures
- ◆ Partners are saying that CURE's training and facilitation is good

Weaknesses

104. The following are CURE's weaknesses spelt out by partners:

- ◆ Some staff are underutilised
- ◆ Specific work output (e.g. manuals) is not demonstrated
- ◆ CURE has not been responsive in a timely manner to take up emerging challenges and opportunities
- ◆ Staff/Board relationship is not at its best
- ◆ High staff turnover
- ◆ Financial control is weak, with audits not having been done from 1994 to 1999
- ◆ Capacity is inadequate and results in over-commitment
- ◆ Transport problems are acute
- ◆ CURE should be more vibrant.

Threats

105. The following are threats to CURE that were noted:

- ◆ Future funding beyond December 2001 is not assured
- ◆ CURE's decentralisation to districts would place it in direct competition with other NGOs for resources from District Assemblies
- ◆ Collapse of the organisation if key senior staff were to leave.

Rating of CURE'S performance

106. From actual ratings by thirteen partners, CURE scored a mean of 67.7% (range 45-95%).

The way forward for CURE

107. The issues raised in this evaluation report were presented to make up part of the agenda for CURE's strategic planning exercise to chart out a road map for the next four years (2002-2005) and prioritise activities.

SECTION V

E. STRATEGIC PLANNING FOR CURE

108. A strategic planning workshop facilitated by INTRAC was held in Zomba 21st – 24th August 2001 to enable CURE produce a road map for the next four-year period (2002-2005). The draft evaluation report was examined on the first day during which reactions were recorded. This was followed by two days of intensive searching and strategising. The major issues raised in the evaluation report were taken up and consolidated into a new, more focused role for CURE aimed at making a difference at the community level. Major results of the evaluation-based strategic planning were as follows:

- a) CURE's mission statement was re-defined to the following:
"Enhance the ability of NGOs and CBOs to improve the management of Malawi's environment and natural resources for the benefit of the community through more effective capacity building and co-ordination".
- b) The idea of advocacy/policy analysis taking the centre stage as core-business for CURE was eliminated as an option.
- c) The capacity building approach that partners insisted should continue as reflected in the evaluation was agreed upon as CURE's future core-business, with CURE fulfilling the role of a catalyst or facilitator.
- d) As a direct result of CURE being a catalyst in (c), it was agreed that CURE would now facilitate training without having to do the routine core training itself as in the past.
- e) The focus of the capacity building approach will be for CURE to ensure that NGOs/CBOs are able to deliver CBNRM programmes more effectively at community level through action learning, while also carrying out supporting activities in the non-core business of representation and advocacy. The ECMs were redesigned so that they should become action learning gatherings through demonstration of good practice in CBNRM.
- f) CURE attended to matters of identification of immediate sources of funding to bridge the gap between the funding cycles.
- g) CURE completed strategising by writing of concept papers and proposal development for funding.

Overall Recommendation

The evaluation report highlighted the high impact CURE has achieved in capacity building of core-partners, partners and clients. The report also highlighted the need for CURE to find a way of directly impacting on CBNRM at the grassroots level. During the strategic planning exercise, CURE undertook a review and redesigning of its mission to achieve the set goal, and defined indicators for the monitoring of its progress. CURE then went ahead to change its focus from training as its core-business to facilitation of action learning by NGOs/CBOs, thus making it possible to impact directly on communities.

The above-demonstrated determination by CURE to find the best option for effective delivery of CBNRM at the grassroots level is a major commitment. The team believes that the right, bold decision has been made. The team recommends that CURE's staff and the Board should be supported by the donors to make this new CBNRM strategy work for the benefit of the communities.

F. KEY DOCUMENTS CONSULTED

- CURE. (1998). *Report on the CURE Staff/Board Retreat held at Ku-Chawe in Zomba, 10-12th November 1998*.
- CURE. (1999a). *Program in Support of CBNRM and Environmental Rehabilitation in Malawi*. Internal Progress Report submitted to funding agencies Oxfam, Bilance and CURE, for Reporting Period: December 1998 – June 1999.
- CURE. (1999b). *Program in Support of CBNRM and Environmental Rehabilitation in Malawi*. Internal Progress Report submitted to funding agencies Oxfam, Bilance and CURE, for Reporting Period: July 1999 – December 1999.
- CURE. (2000). *2000 Directory of Non-Governmental Organisations involved in Natural Resource Management in Malawi*. Co-ordination Unit for the Rehabilitation of the Environment.
- CURE. (2000a). *Program in Support of CBNRM and Environmental Rehabilitation in Malawi*. Internal Progress Report submitted to funding agencies Oxfam, Bilance and CURE, for Reporting Period: January 2000 – June 2000.
- CURE. (2000b). *Program in Support of CBNRM and Environmental Rehabilitation in Malawi*. Internal Progress Report submitted to funding agencies Oxfam, Bilance and CURE, for Reporting Period: July 2000 – December 2000.
- EAD. (2001). *Decentralised Environmental Management Manual. Volume 1. A Guide to SOER, DEAP and Micro-Project Preparation*. Internal Working Draft, Environmental Affairs Department/DANIDA.
- MALAWI GOVERNMENT. (2001) *Non-Governmental Organisations Act, 2000*. Act No. 3 of 2001, passed in parliament on 16th January 2001.
- NCE/COMPASS. (2001). *Proceedings of the First National Conference on Community-Based Natural Resource Management in Malawi*. National Council for the Environment CBNRM Working Group/ COMPASS.

ANNEX 1

Terms of Reference for the Evaluation

DMA Consultancy for COMPASS

SCOPE OF WORK - Analyse and evaluate recent performance and impact of CURE and assist in the preparation of a strategic plan for the organisation drawing on the identified strengths and weakness, opportunities and threats

Proposed Personnel:

Number of Days: 24

Position: Performance Evaluation Specialist

Period of Performance: 02/05/2001 to 03/31/2001

Purpose: To help CURE review past performance and impact in preparation for developing a strategic plan for the next 4 years that builds on the organisation's strengths and strives to overcome weaknesses

SUMMARY:

All organisations function within a complex and dynamic environment. Therefore, organisations like CURE need to demonstrate a mature understanding of its changing environment and must be flexible, pragmatic and willing to embrace change as well as guide it. To remain a viable organisation, CURE needs to continue rethinking its way forward and beyond in order to pursue her mission of assisting NGOs and CBOs enhance the impact, gender equity and sustainability of community based environmental and natural resource management in Malawi. In order to accomplish this, it will be necessary for CURE to develop a strategic plan and this can best be accomplished through a participatory review of recent performance and impact followed by a broad-based discussion of options that should lead to a consensus on the way forward. We propose that two short-term consultants - working collaboratively - will undertake these tasks. The first will review CURE's past performance and impact (the subject of this Scope of Work) and the second will facilitate the strategic planning process (the subject of a separate Scope of Work that is attached to this document).

The second consultant/technical assistant will NOT be engaged through COMPASS: CURE's primary donor, OXFAM, will fund his/her work.

Background/Justification

Malawi continues to face serious environmental problems due to mainly high population pressure, poverty and policy conflicts. In an effort to solve the problems, the government has since 1994 reviewed a number of policies related to environment and natural resource management sector such as forestry, fisheries, environment, parks and wildlife, decentralisation and others. The government is currently in the process of developing the land reform policy. Of late through the support from COMPASS, the government is in the process of developing a community based

natural resource management strategy that will lead into the development of the CBNRM policy in the country.

As an apex organisation for information exchange and capacity building, CURE needs to be responsive to the various changes taking place in the country in order to remain a reputable and viable organisation. CURE's role in environmental and natural resource management is highly valued by many stakeholders. To continue providing quality services to partners, CURE needs to visualise its future strategically in order to fit in the changing environment.

Since its establishment in 1994, CURE has been implementing community based environmental and natural resource management programme that focuses on capacity building, coordination and advocacy.

In an effort to rethink the course of direction of the organisation, a four-year strategic plan was developed (1996-2000), which was followed by a series of programme review meetings, staff retreats and board/staff meetings in order to keep the organisation afloat with the various external and internal environmental changes. All these rethinking exercises proved very useful and shaped the way forward for CURE in terms of how the organisation could respond to the changing external and internal environments. These meetings also provided an opportunity for staff to meditate on their various roles and contribution in the organisation as well as discussing some internal management systems. In all the staff retreat, programme reviews and governing council quarterly meetings, a few strategic questions always emerged relating to CURE's strategy in the new millennium.

The following are key questions that we need to answer as an organisation:

What is the impact of the CURE?

How is CURE going to respond to the government decentralisation policy?

How relevant is CURE's capacity building programme approach. Is it still valid and sensitive to the needs and demands of the core-partners?

Should CURE develop an exit strategy? If so what is it?

What is the role of CURE in the land reform processes?

How can CURE play a leading role in advocating for gender and sustainable community based environmental and natural resource governance?

Is the internal office environment in the organisation flexible and responsive to the external changes?

In order to remain a viable and vibrant organisation over the next few years, CURE must initiate a strategic review process. In order to come up with a strategic direction for the organisation, it is important to look back and evaluate how the organisation has performed in the past years.

Objective:

The main objective of this short-term technical assistance is to assist CURE review its recent performance relative to the organisation's objectives and goals. As part of this effort, it will be essential to gauge the impact on CURE's clients and customers and

the level of satisfaction expressed by these organisations.

Tasks:

Carry out an in depth evaluation of CURE's activities and relationship with partners.

Gauge CURE's impact and make recommendations for improvements.

Participate at a strategic planning workshop for CURE and assist in facilitation of the strategic planning process.

Identify four key stakeholders to attend the strategic planning workshop.

Outputs and Deliverables:

A written review of CURE's performance and impact that will be integrated into a workshop report that will form the basis for the development of the strategic plan (2001-2004).

Work Schedule and Reporting Relationship:

The short-term technical assistance will report to Andrew Watson – the COMPASS Chief of Party.

The work schedule will be as follows:

Days 1 and 2: meet with COMPASS and CURE staff and discuss the scope of work and specific approach. At this time the STTA should develop a questionnaire designed to solicit information and opinions of CURE performance and impact from staff (and Board members), partners and customers.

Days 3 to 16: hold meetings with key CURE partners and clients to gather information on CURE performance, customer satisfaction and overall impact.

Days 17 and 18: prepare a draft report on performance and impact based on the interviews and meetings.

Days 19 to 21: help facilitate a retreat for CURE staff, Board members and four key stakeholders at which the findings on performance and impact will be reviewed, future needs assessed and strategic options discussed.

Days 22 to 24: prepare a report that summarises the evaluation and how this has been used to develop the new strategic plan.

Qualifications:

Good understanding of the institutional and political landscape of environmental and natural resource management in Malawi. Familiarity with the work of CURE and partner and client organisations a plus. Demonstrated expertise in performance evaluation and facilitation essential.

ANNEX 2

Guiding questions for interviews conducted

Give an outline of your activities as an organisation.

How do you get informed about training that CURE offers?

What type of training have you undergone with CURE?

What skills have been gained?

Which of these skills have been most useful?

Which of these skills have been least useful?

What type of training do you think is lacking among what CURE is able to offer to meet your needs?

How relevant is CURE's capacity building programme approach?

Is it valid and sensitive to the needs and demands of you as partner/core-partner?

How do we go beyond this?

How is your performance as partner measured and evaluated?

Has CURE established a system of participatory reviews with you?

Have the trained grantees been assessed by periodic data collection?

CURE has closely worked with you as core-partner. Should CURE develop an exit strategy that weans core-partners out? If so, what is it?

What is your assessment of CURE's performance in advocacy in the Land Reform issue? In CBNRM? And in Gender issues?

In what way should CURE continue to play a leading role in advocating for land reform, gender and sustainable community based environmental and natural resources governance?

What are the major environmental issues that you consider need advocacy?

In your opinion, what should CURE do to increase the advocacy role in collaboration with you?

Do you regard CURE as an important institution in your area of action? Explain.

What is your assessment of the impact of CURE?

Is the internal office environment in the organisation flexible and responsive to the external changes?

What has CURE done well?

What are the main deficiencies? How could these be corrected?

What are the services that are not available but you wish could be made available by CURE?

How is your relationship with CURE as service provider?

Comment on CURE's geographical coverage?

How can coverage be made more uniform?

How is CURE going to respond to the government decentralisation policy?

Comment on any other issues that you consider important for consideration by CURE.

ANNEX 3

Evaluation Questionnaire

We shall appreciate receiving your responses to the following questions. Please, note that the information pertains to the period 1999-2001.

Name of your Organisation:

1. Improved Gender Skills and awareness

During the period 1999 to 2001, CURE conducted Gender Awareness and Analysis workshops and offered Gender Advisory Services:

a) How many Gender workshops did your organisation attend?

b) What was the total number of people trained: Number of females?

: Number of males?

c) On how many occasions did CURE offer Gender Advisory Services?

d) Please tick which year(s) you received the Yearly Gender Training Calendar from CURE:

☐ 1999

☐ 2000

☐ 2001

e) On how many occasions did CURE convene a follow-up meeting with you on Gender issues?

f) How have you utilised the knowledge and skills gained as a result of training from CURE's Gender Unit?

2. Improved skills in soliciting community participation in CBNRM projects and programmes.

During the period 1999 to 2001, CURE conducted Participatory Rural Appraisal (PRA), Training for Transformation (TfT), Community Facilitation, and Project

Development and Management (PDM) workshops.

a) How many **PRA** workshops did your organisation attend?

What was the total number of people trained: Number of females?

: Number of males?

b) How many **TfT** workshops did your organisation attend?

What was the total number of people trained: Number of females?

: Number of males?

c) How many **Community Facilitation** workshops did your organisation attend?

What was the total number of people trained: Number of females?

: Number of males?

d) How many **PDM** workshops did your organisation attend?

What was the total number of people trained: Number of females?

: Number of males?

e) How have you utilised the knowledge and skills gained as a result of training from CURE in:
PRA?

TfT?

Community Facilitation?

PDM?

3. Improved ability to effectively formulate and manage CBNRM projects or programmes.

During the period 1999 to 2001, CURE conducted training in project planning and implementation (including participatory monitoring and evaluation)

- a) How many workshops on **project design, implementation, participatory monitoring and evaluation**, convened by CURE, did your organisation attend?

What was the total number of people trained: Number of females?

: Number of males?

- b) On how many occasions did CURE make consultations with your organisation with regard to project planning and implementation?

- c) How have you utilised the knowledge and skills gained as a result of training from CURE in **project design, implementation, participatory monitoring and evaluation**?

4. Improved co-ordination through availability of relevant information on CBNRM

During the period 1999 to 2001, CURE promoted co-ordination amongst NGOs, CBOs, the Government and Donors, through networking, information exchange and printing services

- a) On how many occasions (in the 1999 –2001 period) has your organisation made use of CURE’s Resource Centre?

- b) How many Environmental Co-ordination Meetings (ECM), convened by CURE, did your organisation attend?

- c) Indicate the number of occasions you received the following publications from CURE?

Newsletter Visual Aids Environmental posters

Environmental Education Kits

- d) What are your comments on CURE’s performance in the co-ordination role?

5. Improved CBNRM policies and decisions that incorporate concerns from NGOs, CBOs and the rural communities.

During the period 1999 to 2001, CURE was involved in advocacy to promote and enhance NGO and CBO participation in policy and decision making processes in CBNRM.

- a) How many quarterly meetings did your organisation attend, convened by CURE, on issues that hinder or promote CBNRM activities?
- b) How many public campaigns conducted by CURE did you participate in?
- c) What is your comment on the role CURE has played in promoting NGO/CBO participation in the policy and decision making process affecting CBNRM?

6. Any other general comments you wish to make on CURE?

Thank you for your time.

Please, return to:

E.Y. Sambo
Box 278, Zomba
Tel: 526-622 or 524-385
Fax: 524-760 or 524-297
Cell: 912-084
Email: esambo@sdpn.org.mw

Your contact details:

Name: _____
Title: _____
Tel. _____
Fax: _____
Cell: _____
Email: _____

July 2001

ANNEX 4

Schedule for the Evaluation Mission

DATE	TIME	NAME	DESIGNATION	ISSUES/INSTITUTION
Friday 15 th June	9h	T. Shaba A. Watson (Dr) E. Kamangira N. Nyang'wa (Ms) R. James	CURE - Executive Director COMPASS - Chief of Party CURE – Communications Co-ord. OXFAM – LISEP Programme Co-ordinator INTRAC – Senior Consultant/Trainer	Meeting to review TORs Review of Schedules
	13h	T. Shaba E. Kamangira L. Mihowa (Ms)	CURE staff	In-house meeting with CURE
Monday 9 th July	9h 11h	T. Shaba L. Mihowa	Executive Director Gender and Training Co-ordinator	Institutional arrangement, CURE Capacity building: Gender, CURE
	13:30h 15h	E. Kamangira E.V. Nangoma	Communications Co-ordinator Planning and Development Officer	Co-ordination, CURE Capacity building: TtT, TOT, PRA, etc, CURE
Tuesday 10 th July	15h	A. Kamperewera (Dr)	Deputy Director	Environmental Affairs Department, Lilongwe
Wed. 11 th July	8h 11h	S. Machira K. Nyasulu	NRM Specialist Director	USAID, Lilongwe Department of Forestry, Lilongwe
	14h 16:30h	R. Bhima (Dr) R.M. Jiah	Deputy Director (Research and Planning) Assistant Director	Department of National Parks and Wildlife, Lilongwe DNPW, Lilongwe
Thursday 12 th July	7:50h 10h	L. Sitaubi E. Musopole	Deputy Director Africa Policy Co-ordinator	Forestry Department, Lilongwe Action Aid, Lilongwe
Friday 13 th July	10:30h	W. Chadza	Head, NRM programme	Wildlife Society of Malawi (WSM), Limbe
	13:30h 15:30h	R. Chimsale M. Luhanga H.K. Mtegha	Programme Manager Planning and Advocacy Officer Deputy Director	Churches Action for Relief and Development (CARD), Limbe Evangelical Lutheran Development Programme (ELDP), Blantyre
Monday 16 th July	9h 10:30h	B. Chidzalo M. Binali B. Katundu (Ms)	Acting Director Projects Co-ordinator Capacity Building Officer	Paper Making Trust (PAMET), Blantyre Christian Service Committee, Blantyre
	15h	J. Nyunga P. Sagawa (Ms) O. Khowa	Deputy Executive Director Communications Officer Programme Officer	Active Youth Initiative for Social Enhancement (AYISE), Limbe
Tuesday 17 th July	8:30h 10:15h	M. O'Toole (Ms) M. McNicholl	Director Deputy Director, Programmes	Capacity Building Unit for NGOs (CABUNGO), Blantyre Projects Office, CCAP Synod of Blantyre
	12:15h 13:30h	D. Kusamale (Ms) L. Satali P. Thyangathyanga	Programme Manager (Mpanda Area Development Programme) Training Manager Projects Manager	World Vision International (WVI), Blantyre Enterprise Development and Training Agency (EETA), Blantyre

DATE	TIME	NAME	DESIGNATION	ISSUES/INSTITUTION
Wed. 18 th July	8:30h	D.F.C. Chitedze	Director	Greenline Movement, Machinga
	13:30h	S. Carr (Dr)	Trustee	CURE, Zomba
Thursday 19 th July	10:30h	J. Wilson (Dr)	Trustee	CURE, Zomba
	14:30h	A. Fitzgibbon	Malawi Programme Representative	OXFAM, Blantyre
Monday 23 rd July	8:30h	J.J.A. Nkhwazi	Executive Director	Rural Foundation for Afforestation (RUFA), Mzuzu Development Department, CCAP Synod of Livingstonia, Mzuzu
	11:30h	S.M.F. Nkhandwe		
Tuesday 24 th July	9.15h	M.B. Serenje	Assistant Programme Manager, CDE	DANIDA, Lilongwe
	10:30h	L. Sefu H. Nzima	Director Deputy Director	Department of National Parks and Wildlife (DNPW), Lilongwe
	14h	J. Balarin	Programme Manager, CDE	DANIDA, Lilongwe
Wed. 25 th July	12.15h	E.J.M. Mtwana	Trustee and Chairman Relief Manager	CURE World Vision International (WVI), Blantyre
Friday 27 th July	14:30h	E. M'mangisa T. Chibwana	Chief Executive	UNDP, Lilongwe Malawi Environmental Endowment Trust (MEET), Blantyre
Thursday 2 nd August	10h 12h	N. Nyang'wa R. James	LISEP Programme Co-ordinator Consultant	OXFAM INTRAC
Monday 6 th August	13:45h 15h	A. Umphawi C. Bruessow	Deputy Chief of Party Technical Advisor	COMPASS MEET
Tuesday 7 th August	17h	D. Kambewa		Lake Chilwa Wetland Project, DANIDA, Zomba

ANNEX 5

Definitions of Terms

Evaluation: a periodic assessment of the relevance, performance, efficiency, and impacts of a programme, project or activity in relation to the objectives that should be achieved.

Relevance deals with the appropriateness to the problem and/or target population.

Performance evaluation (or effectiveness analysis) involves the comparison of what the programme achieved against expected output.

Efficiency refers to the comparison of programme costs and benefits.

Impact evaluation refers to assessment of the effects of the programme output on the targeted beneficiaries, also called people level impact.

An **indicator** is a measurable gauge of the quality and impact of project activities and outcomes; it helps assess how well activities and outcomes achieve the targeted result.

Performance indicators enable us to gauge our progress in completing proposed project activities.

Impact indicators enable us and our partners to gauge our success in institutional capacity building, information exchange and knowledge transfer, policy reform and income generation from environmentally sustainable practices.

The **target** is the specific measure to be achieved.

An **efficient monitoring system** must be built around good indicators, cost effective data collection, rigorous analysis, and efficient reporting procedures.

A **Non-Governmental Organisation** (NGO) is a registered organisation, with a written constitution or a governing instrument, that has been constituted for a public benefit purpose (and established in accordance with some nine conditions as set out under Section 4 of the Non-Governmental Organisations Act, 2000).

A **Community Based Organisation** (CBO) is an unregistered organisation formed by a community grouping characterised by a governing committee but without a written constitution.

A **National NGO** is characterised by: complete operational autonomy, a Board of Directors whose majority is composed of nationals operating in the same country, independent fund raising, the origin and current place of legal operation being located in either the same country of operation or elsewhere in Africa and having executives that are paid from within the NGO.

An **International NGO** is defined as an organisation which may or may not be

operating autonomously within Malawi but, otherwise falling under the umbrella of an international office while responding in some manner to a Board of Directors or Trustees outside of Malawi.

ANNEX 6

6A: CURE's Partners and Clients

a) 14 Core-partners of CURE

Active Youth for Social Enhancement (AYISE)
Blantyre CCAP synod
Christian service Committee (CSC)
Churches Action in Relief and Development (CARD)
Enterprise Development and Training Agency (EDETA)
Greenline Movement (GLM)
Lipangwe Organic Manure and Development Farm (LOMADEF)
Livingstonia CCAP Synod
Mineral and Appropriate Technology Applicable in Malawi (MATAMA)
Nkhomano Centre for Development
Paper Making Education Trust (PAMET)
Rural Foundation for Afforestation (RUFA)
Wildlife Society of Malawi (WSM)
Youth Arm Organisation

b) 22 Partners of CURE

Action Aid Malawi (AAM)	APW
Beekeepers Association of Malawi (BAM)	CAYO
Concern Universal	Concerned Youth
Environmental Concern	ESDC
Evangelical Lutheran Development Programme (ELDP)	Eye of the Child
Hills of Dowa	Mzuzu Youth Forum
Mzuzu Youth Watch	Phwezi Foundation for Education, Training and Development
Rights Consciousness	Save the Children Fund of Malawi
Warlords Youth Organisation (WAYO)	World Vision International (WVI)
Youth Arm in Advocacy	Youth Care
WWB	Zipatso Association of Malawi (ZIPA)

c) CURE's clients mentioned in the internal reports and minutes

Evangelical Baptist Church of Malawi (EBCM)
Bwanje Rural Development Organisation (BERDO)
Foundation for Community Support Services (FOCUS)
Manchewe Tree Nursery Programmes (MTNP)
National Association of Business Women (NABW)
PELUM
SARDC
Sustainable Forestry Management Project (SFMP)
Titani Rural Youth Support Organisation
Training Support Programme (TSP)

Wildlife Producers Association of Malawi (WPAM)
 World Vision Malawi (WVM)
 Blantyre City Assembly (BCA)
 Malawi Agroforestry Extension (MAFE)
 Creative Centre for Community Mobilisation (CRECCOM)
 Story Workshop

6B: NGOs as Listed in CURE Directory

a) 39 NGOs working in the Natural Resource Management Sector in Malawi

Action Aid Malawi (AAM)	Adventist Development & Relief Agency (ADRA)
Africare – Malawi	Canadian Physicians for Aid and Relief (CPRA)
CARE International	Catholic Development Commission in Malawi (CADECOM)
Chilengedwe Reserve Council (CHIRECO)	Chitukuko Cha Amayi M’Malawi (CCAM)
Chretiens Sans Frontiers (CSF)	Christian Service Committee (CSC)
Churches Action for Relief and Development (CARD)	Concern Universal
Co-ordination Unit for the Rehabilitation of the Environment (CURE)	Development Department (CCAP Synod of Livingstonia)
Enterprise Development and Training Agency (EDETA)	Evangelical Lutheran Development Programme (ELDP)
Greenline Movement (GLM)	Kaporo Foundation for Rural Development (KAFA)
Lipangwe Organic Manure and Development Farm (LOMADEF)	Malawi Fresh Water Project (MFWP)
Naming’azi Farm Training Centre (Under Projects Office, CCAP Blantyre Synod)	National Initiative for Civic Education (NICE)
Nkhomano Centre for Development	Paper Making Education Trust (PAMET)
Phwezi Foundation for Education, Training and Development	Plan International – Malawi
Projects Office – CCAP Blantyre Synod	Rural Foundation for Afforestation (RUFA)
Save the Children Fund – UK	Save the Children Fund of Malawi
Self Help Development International (SHDI)	The Salvation Army
The Shire Highlands Organic Growers Association (SHOGA)	Village Enterprise Zone Association (VEZA)
Voluntary Services Overseas (VSO)	Wildlife Action Group (WLAG)
Wildlife Society of Malawi (WSM)	World Vision International (WVI)
Zipatso Association of Malawi (ZIPA)	

b) 7 Youth NGOs working in the Natural Resource Management Sector in Malawi

Active Youth for Social Enhancement (AYISE)

Environmental Concern Youth Association
(ECOYA)
Eye of the Child
Keen Youth Organisation
Mthunzi wa Malawi
Warlords Youth Organisation (WAYO)
Youth Arm Organisation

ANNEX 7

Capacity Building Programme by CURE (1999 – 2001)

7A: Summary of Activities

	Type of Training/Activity	Number of Trainings/ Activities Targeted/Planned	No. Trainings/ Activities Achieved	No. Trainees Targeted	No. of Trainees Achieved	No. of Partners Trained
1	Gender awareness and analysis workshops	20	10	400	294	26
2	Yearly gender training calendars	3	1?			
3	Gender advisory services	18				
4	PRA training workshops	6	6	90	93	18
5	TfT and community mobilisation workshops	3	1	45	20	11
6	Community facilitation workshops	3	2	45	38	11
7	Training workshops on PDM (partner specific)	11 partners	1		14	8
8	Training workshops on project design	5	3	75	39	14
9	One-off consultations with emerging CBOs and NGOs.	60				
10	Strengthen the Resource Centre	<ul style="list-style-type: none"> •Computerised cataloguing of all books, reports and journals, •procurement of additional reading materials and a •computer, and •advertising the Resource Centre. 	<ul style="list-style-type: none"> •203 books catalogued •47 books purchased 			
11	Networking activities	<ul style="list-style-type: none"> •Participate in 18 networks, •subscribe to internet services, •conduct 12 Environmental Co-ordination Meetings (ECMs), •produce one NGO directory on NRM and one •Gender directory, •produce six databases on NRM. 	<ul style="list-style-type: none"> •4 national & 4? regional •done •7 done •done •done •not done 			

	Type of Training/Activity	Number of Trainings/ Activities Targeted/Planned	No. Trainings/ Activities Achieved	No. Trainees Targeted	No. of Trainees Achieved	No. of Partners Trained
12	Generate and disseminate publications and visual aids	<ul style="list-style-type: none"> •Publish 12 newsletters, •produce 36 paid-up desk-top publications, •produce 5 environmental education kits for NGOs and CBOs, •produce and circulate 15 environmental posters 	<ul style="list-style-type: none"> •5 done •6 done •not done •21 done 			
13	Environmental Outreach activities	<ul style="list-style-type: none"> •Prepare 14 newspaper articles related to CURE activities, •CURE actively participating in 17 national environmental events. 	<ul style="list-style-type: none"> •10 published •Participated in 8 			
14	Synthesise and disseminate findings on environment and NRM issues.		•Not done			
15	Quarterly meetings with NGOs and CBOs on issues that hinder or promote CBNRM activities.	12	•9 done			
16	Initiate discussions with policy and decision-makers at government and NGO level.	10	•21 done			
17	Design, print and distribute materials containing environmental and NRM advocacy messages.	<ul style="list-style-type: none"> •Leaflets, •15 posters and •200 T-shirts 	<ul style="list-style-type: none"> •3 done •21 done •not done 			
18	Conduct public campaign meetings with NGOs and other youth organisations.	6	•4 done			
19	Produce and have broadcast radio plays covering environmental messages	30	•12 done			

	Type of Training/Activity	Number of Trainings/ Activities Targeted/Planned	No. Trainings/ Activities Achieved	No. Trainees Targeted	No. of Trainees Achieved	No. of Partners Trained
20	Hold quarterly discussions with the mass and print media/journalists.	9	•3 done			

7B: Details of Participant NGOs Trained

	Type of Training and Cost	Number of Trainees Achieved	Partners Trained	Number of Partners Trained	Dates
1	Open Gender Training Workshop (1 st)	20	WSM RUFA LOMADEF PAMET Nkhomano MATAMA CSC EDETA MFWP EBCM ELDP EAD Oxfam-GB	13	April 1999
2	Open Gender Training Workshop (2 nd)	24	WSM RUFA LOMADEF PAMET Nkhomano CSC Blantyre Synod AYISE CARD Livingstonia Syn. Youth Arm EBCM ELDP WVI FRIM Action Aid Concern Univ.	17	July 1999
3	Open Gender Training Workshop (3 rd) Total Cost = K114,106	14	CSC Livingstonia Syn. CADECOM ELDP WVI Forestry Dept. Action Aid	7	Oct. 1999
4	Gender Awareness and Analysis for Staff	62	WSM RUFA LOMADEF PAMET Nkhomano MATAMA CSC EDETA Blantyre Synod AYISE Livingstonia Syn. CARD Youth Arm ELDP	14	1999

	Type of Training and Cost	Number of Trainees Achieved	Partners Trained	Number of Partners Trained	Dates
5	Gender Awareness and Analysis for Staff	21	WVI EAD Forestry Dept. MFWP EBCM CADECOM FRIM OXFAM Action Aid Concern Univ.	10	1999
6	In-house Gender Sensitisation Workshop	13	EDETA	1	1999
7	Community Based Gender Training	35	CARD	1	1999
8	Community Based Gender Training	30	WVI	1	1999
9	Gender Awareness & Sensitisation Workshop for Executive Directors working with CURE Total Cost = K198,430	12	WSM LOMADEF EBCM RUFA CSC CURE EDETA Greenline Mov. Livingstonia Syn. CARD Blantyre Synod Nkhomano	12	16-20 April 2000
10	In-house Community Based Gender Training	32	CSC-Mulanje	1	1999
11	Gender Training of Trainers Workshop	12	CSC PAMET WSM Livingstonia Syn. EDETA Greenline Mov. RUFA Forestry Dept. CARD CURE	10	11-15 Sept. 2000
12	Gender Leadership Training for Women Total Cost = K265,330	19	EDETA PAMET Nkhomano CSC WSM CARD Greenline Mov.	7	9-14 July 2001
	TOTALS: GENDER WORKSHOPS = 10	294		26	

	Type of Training and Cost	Number of Trainees Achieved	Partners Trained	Number of Partners Trained	Dates
13	Lake Chilwa PRA Workshop	12	EAD Phalombe RDP Fisheries Dept. Forestry Dept. Machinga ADD Zomba RDP ELDP CDO	8	Feb. – Mar. 1999
14	Ekwendeni PRA Workshop	11	Livingstonia Syn. BAM Min. of Agriculture Forestry Dept. ELDP RUFA DNPW	7	June 1999
15	Natural Resources College PRA Workshop Total Cost = K242,560	13	WSM ELDP Min. of Agric. Forestry Dept. CSC EDETA	6	Oct. 1999
16	PRA training for Staff	16	WSM RUFA CSC EDETA Livingstonia Syn. ELDP	6	1999
17	PRA training for Staff	22	EAD Forestry Dept. Min. of Agric. Fisheries Dept. BAM DNPW	6	1999
18	PRA for Village Committees	19	Action Aid	1	1999
	TOTALS: PRA WORKSHOPS = 6	93		18	
19	Project Planning Workshop	16	RUFA CSC LOMADEF ELDP Livingstonia Syn. Greenline Mov. Nkhomano CARD EDETA WSM	9	Aug. 1999

	Type of Training and Cost	Number of Trainees Achieved	Partners Trained	Number of Partners Trained	Dates
20	Project Planning Workshop	18	WSM RUFA LOMADEF Nkhomano CSC EDETA Blantyre Synod Livingstonia Syn. CARD Greenline Mov. ELDP	11	1999
21	Project Planning Workshop	5	Forestry Dept. DNPW BCA	3	1999
	TOTAL: WORKSHOPS = 3	39		14	
22	Community Mobilisation Workshop	19	EDETA RUFA Greenline Mov. PAMET WSM Nkhomano LOMADEF CSC Blantyre Synod CARD	10	Sept. 1999
23	Community Mobilisation Workshop	19	WSM RUFA LOMADEF PAMET Nkhomano CSC EDETA Blantyre Synod CARD Greenline Mov. ELDP	11	1999
	TOTAL: WORKSHOPS = 2	38		11	
24	Training of Trainers Workshop Participants = K174,950 Consultant = <u>K191,520</u> K366,470	15	Nkhomano EDETA RUFA LOMADEF CSC GLM Livingstonia Syn. CURE PAMET	9	7-18 Feb. 2000
	TOTAL: WORKSHOPS = 1	15		9	

	Type of Training and Cost	Number of Trainees Achieved	Partners Trained	Number of Partners Trained	Dates
25	Training for Transformation Workshop	20	Min. of Agric. CSC Greenline Mov. LOMADEF EDETA Nkhomano CARD Livingstonia Syn. TSP WVM Blantyre Synod	11	6-17 Mar. 2000
	TOTAL: WORKSHOPS = 1	20		11	
26	Indigenous Knowledge Systems Workshop	18	Forestry Dept. Min. of Agriculture Livingstonia Syn. CSC CARD Action Aid MTNP BCA MAFE	9	7-8 Sept. 2000
	TOTAL: WORKSHOPS = 1	18		9	
27	Proposal Writing Workshop	14	FOCUS CSC GLM WSM CARD CURE ELDP BERDO	8	8-13 April 2001
	TOTAL: WORKSHOPS = 1	14		8	

ANNEX 8

CURE's Record of Planned vs. Achieved Activities (1999-2000)

Period	Planned Activities	Achieved Activities
1999 – 2000	1. CAPACITY BUILDING	
1.1	Gender and Natural Resource Management	
	<i>Objective 1: To build the capacity of NGOs in addressing gender aspects of NRM through training and integrating gender concerns into CBNRM programmes</i> <i>Output 1: Improved gender awareness and analytical skills amongst NGOs and CBOs involved in VBNRM</i>	
	•6 gender awareness and analysis trainings for core-partners	•3 trainings conducted for 58 participants from partners and core-partners •1 workshop for Executive Directors and Senior Officers organised. 15 participated (7 were Executive Directors, the rest were Senior Officers) •1 gender TOT conducted for 12 officers that had previously undergone basic gender training and are involved in training activities within the core-partner organisations
	•NGO and CBO gender training needs assessment	•14 partner NGOs visited and interviewed; •4 CBO women groups from CSC, EDETA and NABW visited and interviewed
	•7 partner specific gender training	•4 in-house training sessions for CARD, EDETA, WVI and CURE were organised •1 workshop conducted for 32 participants from CSC •Conducted a 10 day gender analysis of the Oxfam's Mulanje Sustainable livelihood programme
	•Follow-up visits to partners	•24 core-partners were visited and other partners were visited during the capacity building needs assessment and evaluation •Follow-up visits after Directors' gender sensitisation training workshop made to Livingstonia Synod, EBCM, CSC, CADECOM, PAMET, WSM, CARD, EDETA
	•18 gender advisory services to core-partners	•29 gender advisory services accomplished •Reviewed and commented upon CSC's new gender policy •Participated in the SFMP research work for a month
	•Networking	•Established formal links with Theatre for Development of the Story Workshop and CRECCOM. •Participated in the International Women's Day activities •Took part in the development and launching of the national gender policy •Co-organised a leadership workshop and participated in activities of the newly formed Young Women Leaders Network (CURE elected as Chairperson) •CURE as member of TSP's Core-Trainers Network •Participated in a number of networking activities with Ministry of Gender (developing Malawian gender training manual), CONGOMA, PELUM and others •Participated in TV Malawi gender programmes •Carried out exchange visit to EBCM impact area in Kwakwitanda in Balaka with partners: CARD, EDETA, Nkhomano, PAMET and WSM

Period	Planned Activities	Achieved Activities
1999 – 2000	CAPACITY BUILDING	
1.2	Participatory Approaches to Natural Resource Management	
	<i>Objective 2: To improve skills of NGOs and CBOs in order for them to facilitate community participation in CBNRM initiatives</i> <i>Output 2: Improved skills amongst NGOs and CBOs in soliciting community participation in CBNRM projects</i>	
	•Organise 4 PRA training workshops for core-partners	•2 workshops organised for 25 participants (one was for 11 participants from Northern Region based NGOs and CBOs) •2 PRA exercises for WPAM and Forestry Department conducted
	•Facilitate 2 TtT workshops for core-partners	•1 workshop for 20 participants conducted
	•1 TOT workshop for core-partners	•1 workshop organised for 15 NGO participants
	•3 Community facilitation/ mobilisation training workshops for core-partners	•1 workshop for 19 participants from core-partner NGOs and CBOs conducted; the other workshop not done because partners wanted more focus on TOT and TtT
	•Partner specific PRA training workshops	•1 PRA organised for Action Aid Malawi to develop a management plan for Maghese and Wilindi Forests in Chitipa, and VNRC training conducted •1 PRA for DEOs and NGOs staff conducted for 20 participants organised for the Lake Chilwa Wetland Project •1 PRA session in the context of co-management conducted for senior staff from DNPW
	•Research on IKS	•Key participating agencies were identified and one workshop was held for participating institutions (Forestry Dept., Land Resources and selected NGOs)

Period	Planned Activities	Achieved Activities
1999 – 2000	CAPACITY BUILDING	
1.3	Project Planning and Development	
	<i>Objective 3: To assist emerging NGOs and CBOs in participatory project implementation, planning and implementation through training and advisory services</i> <i>Output 3: Emerging NGOs and CBOs partners ability to effectively formulate and implement CBNRM projects</i>	
	•Capacity needs assessment of core-partner NGOs and CBOs	•14 organisations were visited and interviewed
	•1 workshop for project planning and implementation for core partners	•Not done due to financial resources
	•1 project proposal writing workshop for core-partners	•Not done due to financial resources
	•Provide advisory services on project planning, proposal writing and implementation to core-partners	•Advised 9 core-partners and several other emerging organisations on proposal writing and participatory project monitoring and evaluation
	•2 meetings with core-partners to discuss CURE's 3-year capacity building strategy and implementation plan	•2 meetings held in March and December with all core-partners attending excluding Livingstonia Synod.
	•Ground truthing of partner NGO projects	•10 projects implemented by RUFA, LOMADEF, ELDP, Livingstonia Synod, Phwezi Foundation, Greenline Movement, MATAMA, EDETA, CARD, CSC and WSM were visited

	•Technical advise in CBNRM	•MATAMA, LOMADEF, GLM, Concern Universal, Action Aid Malawi, Habitat for Humanity were advised on several aspects of NRM, community mobilisation, project proposal writing, project implementation and formulation of Environmental Management Manual.
	•Facilitate 2 NGO exchange visits	•Facilitated 1 visit to LOMADEF and WSM projects
	•SWOT analysis of one core-partner; •evaluation of core-partner projects	•SWOT done for EDETA •Evaluated GLM programme

Period	Planned Activities	Achieved Activities
1999 – 2000	2. COMMUNICATION AND CO-ORDINATION	
	<i>Objective 4: To promote co-ordination and enhance the overall effectiveness of NGOs and CBOs involved in CBNRM through networking, information exchange and printing services. Output 4: Improved co-ordination amongst NGOs and CBOs through availability of relevant information on CBNRM and development information sharing pathways.</i>	
	2.1 Networking	
	•Organise 8 national Environmental Co-ordination Meetings	•7 ECMs held (one of these being on decentralisation and the role of NGOs at district level; one on biodiversity needs our care; and another on environmental conservation – unavoidable concept in NRM)
	•Organise 2 regional co-ordination meeting	•1 meeting organised in Mzuzu for Northern Region (50 people attended including 5 traditional leaders) •The other meeting not organised due to finances
	•Participate in national and regional networking activities	•Participated in 4 national networks: CURE assisted in organising Kapinga Network (Participatory Development Network), attended the Integrated Pest Management network, SDNP network, the International Network on Forest Trees and People organised by FAO and other networking meetings
	2.2 Information dissemination	
	•Prepare and print 8 newsletters	•5 published and circulated (a total of 2700 copies produce and circulated to 500 organisations by December 2000)
	•Revise and produce 3 CURE brochures	•Revised 3 brochures for the gender programme, resource centre and the Zambezi basin state of the environment report
	•Produce an environmental education training kit	•Suspended because Environmental Education Officer not yet recruited
	•Disseminate E&NRM regional materials	•Circulated the Zambezi basin newsletter, fact sheet and policy briefs on behalf of SARDC and PELUM newsletters
	•Undergo training in web page design and design CURE web page	•Training not done due to financial limitations, hence web page not designed
	Outreach activities	
	•Design and print posters	•500 posters on national tree planting day, 1500 posters on the World Environment Day, 100 calendars on Biodiversity Conservation, 5000 posters on CCD were produced in 1999; produced 6 posters on National Tree Planting Day, 5 types of posters on World environment Day, 6 on women and natural resources management in 2000

	•Participate in national and international events	•Participated in 8 national events (2 National Tree Planting Days, World Water Day, 2 World Environment Days, World Day to Combat Desertification, preparatory meetings for the Beijing+5, and gender day)
	•Participate in 4 radio programmes	•Participated in 5 radio and phone-in programmes on Tree Planting and a press conference on World Environment Day and the Green Diary programme
	•Produce 4 newspaper articles	•10 articles on CURE activities published
	•Produce 1 NRM NGO directory	•1 directory produced and 1000 copies circulated
	•Organise a meeting with youth organisations to discuss the water hyacinth problem	•Meeting was held with representatives of 10 youth organisations
	•12 paid-up desk-top publications	•6 desk-top publishing jobs from Lake Chilwa Wetland Project, CARD, USAID (business cards), Habitat for Humanity, WVI (certificates) and ODEP (calendars) were accomplished
	•Procure video screen and cassette recorder	•Not purchased – funds not adequate
2.3	<i>Duplo Print Unit</i>	
	•Produce a business plan for the DPU	•Business plan produced and discussed during staff and board meetings
	•Assess the self-sustainability of the DPU	•The DPU was assessed and report circulated as not viable as a business venture
	•Prepare DPU final report to ICCE	•Report produced and submitted
2.4	<i>Resource Centre</i>	
	•Train Documentation Officer in CD/ISIS	•Documentation Officer trained at EAD
	•Catalogue the resources in the centre	•203 books catalogued in the computer using CD/ISIS
	•Advertise the resource centre	•The centre resources were advertised during the ECMs and brochure widely circulated
	•Stocking the resource centre with more Malawian publications and research reports	•Many Malawian reports and publications have been acquired and are available in the centre
	•Identify and purchase books	•47 books purchased, 2 video tapes and 10 magazines subscribed to
	•Identify and acquire training manuals	•2 manuals on participatory rural appraisal and indigenous technical knowledge acquired

Period	Planned Activities	Achieved Activities
1999 – 2000	3. ADVOCACY	
	<i>Objective 5: To promote NGO and CBO participation in policy and decision-making processes affecting environmental and CBNRM</i> <i>Output 5: Improved environmental and CBNRM policies that incorporate the concerns from the NGOs and CBOs</i>	
	•3 Quarterly meetings with partner NGOs and CBOs	•3 meetings with partners NGOs to discuss the advocacy strategy and issues for advocacy •CURE held discussions with 6 individual organisations on policy issues or problems that are affecting progress of their activities

	<ul style="list-style-type: none"> •Meetings with Government policy makers 	<ul style="list-style-type: none"> •15 meetings held with Directors of Forestry, Fisheries, Environmental Affairs, Land Resources, Agriculture and Energy Departments to discuss co-management, land and tree tenure, policy implementation process, environmental micro-projects implementation, and the water hyacinth problem in 1999. •6 meetings with Directors of Forestry, EAD and Deputy Director of Lands held in 2000
	<ul style="list-style-type: none"> •Attend 12 donor co-ordination meetings 	<ul style="list-style-type: none"> •Attended 12 NRM donor co-ordination meetings where NGO and CBO concerns on implementation of NRM projects were presented
	<ul style="list-style-type: none"> •Organise 3 NGO advocacy task force meetings 	<ul style="list-style-type: none"> •5 advocacy task force meetings conducted
	<ul style="list-style-type: none"> •Organise 2 meeting with the NCE chairman 	<ul style="list-style-type: none"> •1 meeting with chairman of NCE held
	<ul style="list-style-type: none"> •Attend 2 NCE-CBNRM working group meetings 	<ul style="list-style-type: none"> •Attended 2 meetings (CURE elected Vice Chair of working group
	<ul style="list-style-type: none"> •Organise 1 meeting with the Parliamentary Committee on the Environment 	<ul style="list-style-type: none"> •1 informal meeting with some members of the Parliamentary Committee on the Environment held at New Parliament House
	<ul style="list-style-type: none"> •Organise 2 public campaign meetings on NRM user and property rights 	<ul style="list-style-type: none"> •4 meetings were organised to discuss CBNRM and Convention to Combat Desertification
	<ul style="list-style-type: none"> •Produce and broadcast radio plays 	<ul style="list-style-type: none"> •12 radio plays on charcoal burning, gender issues, waste management, NGOs activities and others were produced and handed over to MBC. A few were aired.
	<ul style="list-style-type: none"> •Design and print NRM t-shirts 	<ul style="list-style-type: none"> •Not done
	<ul style="list-style-type: none"> •Participate in an advocacy research activity 	<ul style="list-style-type: none"> •Participated in 2 advocacy research activities on human/wildlife (crocodiles) conflict in the Lower Shire river and energy saving stoves
	<ul style="list-style-type: none"> •Develop an advocacy research proposal 	<ul style="list-style-type: none"> •Developed an advocacy research proposal and submitted to Oxfam for funding
	<ul style="list-style-type: none"> •Quarterly meetings/discussions with the journalists and artists (NGO/media consultative meetings) 	<ul style="list-style-type: none"> •1 meeting was organised between NGOs and journalists
	<ul style="list-style-type: none"> •National Land Policy debate 	<ul style="list-style-type: none"> •Issued 1 press release and 3 newspaper articles •Organised 1 civil society organisations meeting to debate the policy •Assisted CCJP to release its press release on NLP •Held e-mail discussions with international land experts •Developed an issues paper on the national land policy
	<ul style="list-style-type: none"> •Proposal on CURE's strategic plan 	<ul style="list-style-type: none"> •Developed a strategic plan proposal and submitted to Oxfam, CORDAID and COMPASS

ANNEX 9

Responses by the ten NGOs that Completed the Questionnaire of Annex 3

ITEM		RESPONSE			
		Total NGO participants	Total trained	Mean	Range
1a)	Gender workshops attended	10		3.7	1-9
b)	i) Females trained		44	4.4	1-20
	ii) Males trained		49	4.9	0-22
c)	Gender advisory services	7		2.0	1-4
d)	Gender training calendars (3)	7		2.0	1-3
e)	Follow-up on gender issues	5		1.8	1-3
f)	Were skills used? How?	Y=9, N=1			
2a)	PRA workshops attended	8		1.1	1-2
	i) Females trained		41	5.1	0-38
	ii) Males trained		56	7.0	0-47
b)	TfT workshops attended	9		1.7	1-5
	i) Females trained		7	0.8	0-2
	ii) Males trained		13	1.4	0-4
c)	Community facilitation w/shops	5		1.6	1-4
	i) Females trained		1	0.2	1
	ii) Males trained		8	1.6	1-4
d)	PDM workshops attended	7		1.4	1-2
	i) Females trained		2	0.3	1
	ii) Males trained		10	1.4	1-3
e)	Were skills used? How?: PRA	Y=8 (all)			
	TfT	Y=8, N=1			
	Community facilitation	Y=5 (all)			
	PDM	Y=6, N=1			
3a)	Project design workshops	7		1.3	1-2
	i) Females trained		2	0.3	1
	ii) Males trained		12	1.7	1-3
b)	Consultations with CURE on design	4		1.3	1-2
c)	Were skills used? How?	Y=7 (all)			
4a)	Occasions Resource Centre used	9		4.7	1-8
b)	ECM meetings attended	10		5.5	1-10
c)	No. received: Newsletter	10		3.7	2-5
	Visual Aids	2		1.5	1-2
	Environ. posters	7		2.4	1-3
	Environ. ed. kits	1		1	1
d)	Comment on co-ordination	Y			
5a)	Meetings on CBNRM constraints	6		2.3	1-4
b)	Public campaigns on CBNRM	Y			
c)	Comment on CURE's role on CBNRM	Y			
6	General comment on CURE	Y			

Y = Yes: meaning that a comment was made. See the relevant section of the Report for details of the answers given.

COMPASS Publications

Document Number	Title	Author(s)	Date
Document 1	COMPASS Year 1 Work Plan	COMPASS	Jul-99
Document 2	COMPASS Small Grants Management Manual	Umphawi, A., Clausen, R., Watson, A.	Sep-99
Document 3	Year 2 Annual Work Plan	COMPASS	Dec-99
Document 4	July 1 - September 30, 1999: Quarterly Report	COMPASS	Oct-99
Document 5	Training Needs Assessment: Responsive Modules & Training Approach	Mwakanema, G.	Nov-99
Document 6	Guidelines and Tools for Community-Based Monitoring	Svendsen, D.	Nov-99
Document 7	Policy Framework for CBNRM in Malawi: A Review of Laws, Policies and Practices	Trick, P.	Dec-99
Document 8	Performance Monitoring for COMPASS and for CBNRM in Malawi	Zador, M.	Feb-00
Document 9	October 1 - December 31, 1999: Quarterly Report	COMPASS	Jan-00
Document 10	Workshop on Principles and Approaches for CBNRM in Malawi: An assessment of needs for effective implementation of CBNRM	Watson, A.	Mar-00
Document 11	January 1 - March 31, 2000: Quarterly Report	COMPASS	Apr-00
Document 12	Thandizo la Ndalama za Kasamalidwe ka Zachilengedwe (Small Grants Manual in Chichewa)	Mphaka, P.	Apr-00
Document 13	Njira Zomwe Gulu Lingatsate Powunikira Limodzi Momwe Ntchito Ikuyendera (Guidelines and Tools for Community-based Monitoring in Chichewa)	Svendsen, D. - Translated by Mphaka, P. and Umphawi, A.	May-00
Document 14	Grass-roots Advocacy for Policy Reform: The Institutional Mechanisms, Sectoral Issues and Key Agenda Items	Lowore, J. and Wilson, J.	Jun-00
Document 15	A Strategic Framework for CBNRM Media Campaigns in Malawi	Sneed, T.	Jul-00
Document 16	Training Activities for Community-based Monitoring	Svendsen, D.	Jul-00
Document 17	April 1 - June 30, 2000: Quarterly Report	COMPASS	Jul-00
Document 18	Crocodile and Hippopotamus Management in the Lower Shire	Kalowekamo, F.	Sep-00
Document 19	Cost-Sharing Principles and Guidelines for CBNRM Activities	Moyo, N.	Sep-00
Document 20	Workplan: 2001	COMPASS	Nov-00

Document 21	July 1 - September 30, 2000: Quarterly Report	COMPASS	Oct-00
Document 22	Opportunities for Sustainable Financing of CBNRM in Malawi: A Discussion	Watson, A.	Nov-00
Document 23	Framework for Strategic Planning for CBNRM in Malawi	Simons, G.	Nov-00
Document 24	Kabuku Kakwandula Ndongomeko ya Thumba Lapadera la Wupu wa COMPASS (chiTumbuka version of the COMPASS Small-grant Manual)	Umphawi, A., Clausen, R. & Watson, A. Translated by Chirwa, T.H. & Kapila, M.	Dec-00
Document 25	COMPASS Performance and Impact: 1999/2000	COMPASS	Nov-00
Document 26	October 1 - December 31, 2000: Quarterly Report	COMPASS	Jan-01
Document 27	COMPASS Grantee Performance Report	Umphawi, A.	Mar-01
Document 28	January 1 - March 31, 2001: Quarterly Report	COMPASS	Apr-01
Document 29	Natural Resource Based Enterprises in Malawi: Study on the contribution of NRBES to economic development and community-based natural resource management in Machinga District	Lowore, J.	Apr-01
Document 30	Proceedings of the First National Conference on CBNRM in Malawi	Kapila, M., Shaba, T., Chadza, W., Yassin, B. and Mikuwa, M.	Jun-01
Document 31	Natural Resource Based Enterprises in Malawi: Action Plans	Watson, A.	Jun-01
Document 32	Examples of CBNRM Best Practices in Malawi	Moyo, N. & Epulani, F.	Jun-01
Document 33	Media Training for CBNRM Public Awareness	Kapila, M.	Jun-01
Document 34	April 1 - June 30, 2001: Quarterly Report	COMPASS	Jul-01
Internal Report 1	Building GIS Capabilities for the COMPASS Information System	Craven, D.	Nov-99
Internal Report 2	Reference Catalogue (2nd Edition)	COMPASS	Feb-01
Internal Report 3	Workshop on Strategic Planning for the Wildlife Society of Malawi	Quinlan, K.	Apr-00
Internal Report 4	Directory of CBNRM Organizations (2nd Edition)	COMPASS	Jan-01
Internal Report 5	Proceedings of Water Hyacinth Workshop for Mthunzi wa Malawi	Kapila, M. (editor)	Jun-00
Internal Report 6	COMPASS Grantee Performance Report	Umphawi, A.	Jun-00
Internal Report 7	Examples of CBNRM Best-Practices in Malawi	Moyo, N. and Epulani, F.	Jul-00
Internal Report 8	Software Application Training for COMPASS	Di Lorenzo, N.A.	Sep-00
Internal Report 9	Directory of COMPASS ListServ Members	Watson, A.	Jan-01
Internal Report 10	Introductory Training in Applications of Geographic Information Systems and Remote Sensing	Kapila, M.	Feb-01

Internal Report 11	COMPASS TAMIS Grants Manual	Exo, S.	Mar-01
Internal Report 12	Review of Recommendations of the Lake Chilwa and Mpoto Lagoon Fisheries By-Laws Review Meeting	Nyirenda, K.	May-01